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## REPORT OF THE COMMISSION

TO

INVESTIGATE THE EXTENT

OF

FEEBLEMINDEDNESS, EPILEPSY AND INSANITY

AND

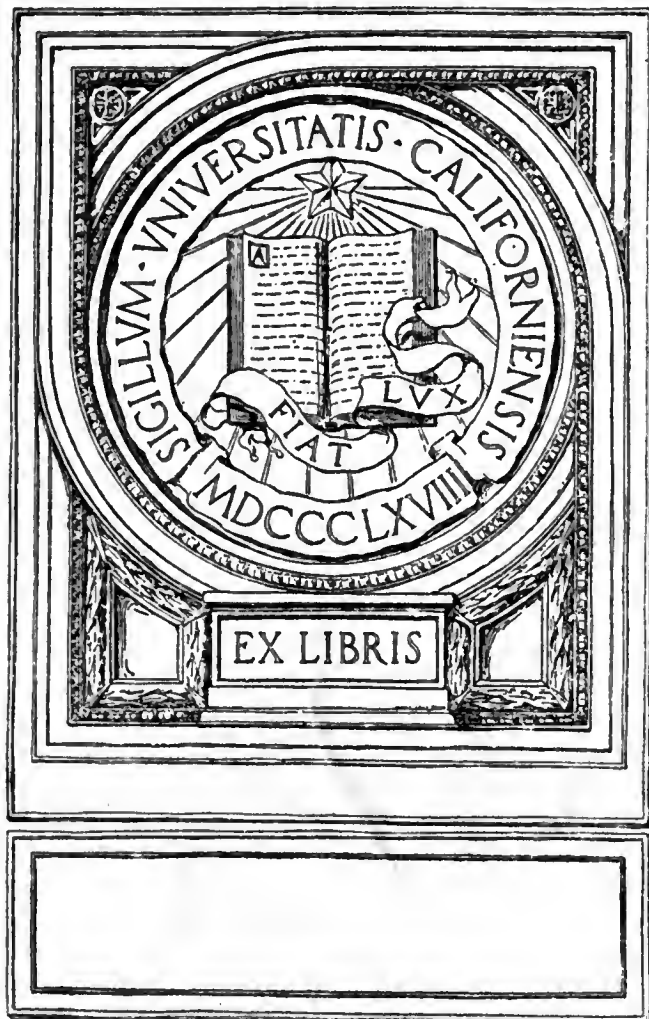
Other Conditions of Mental Defectiveness

IN MICHIGAN

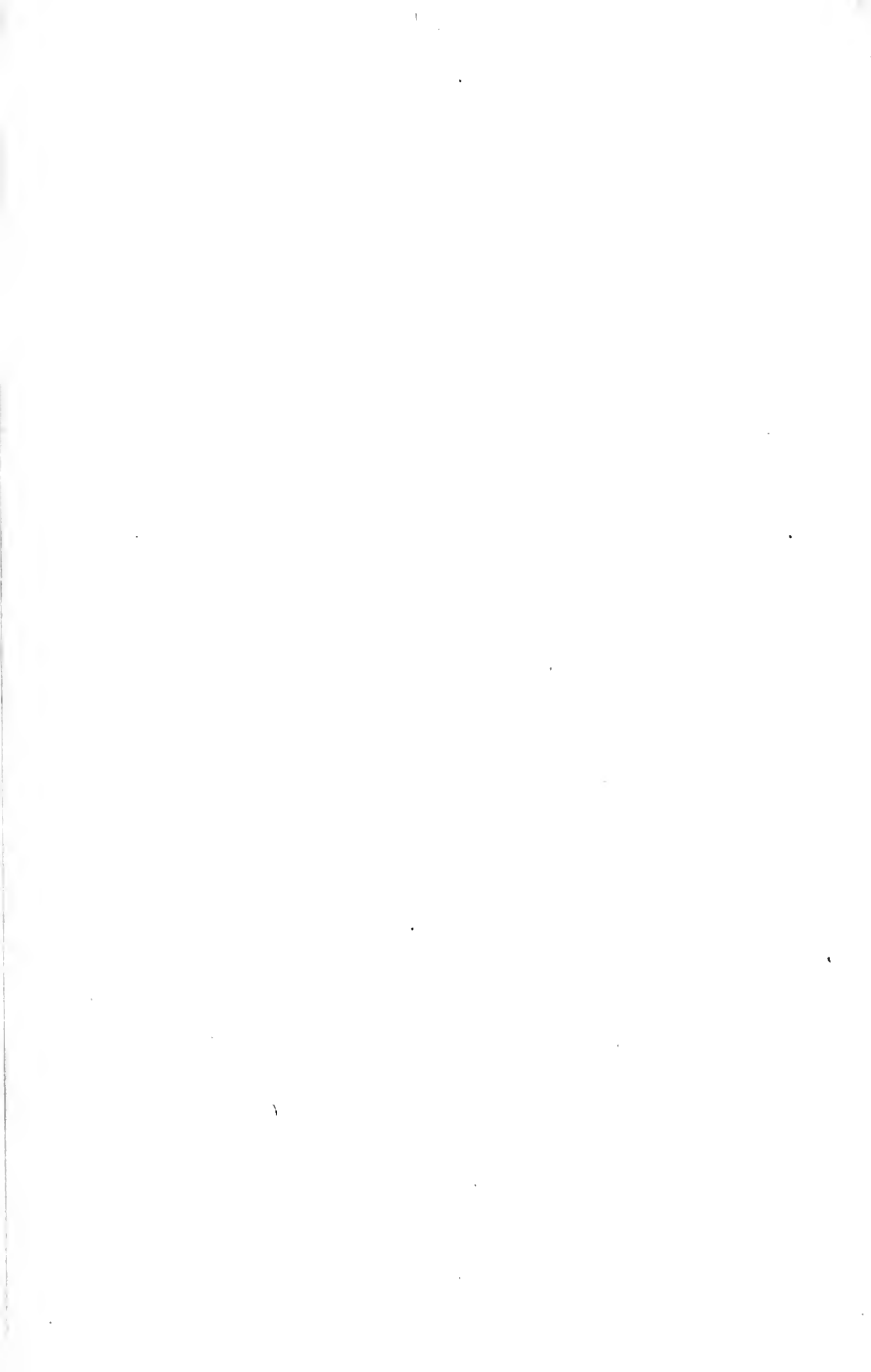


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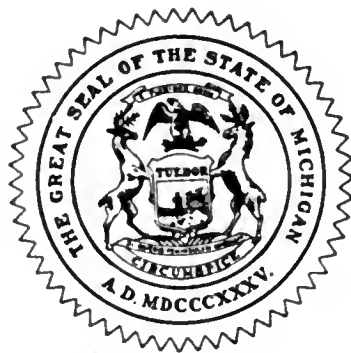








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IN MICHIGAN



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NOTE. — It must be stated that these charts are incomplete, as they represent only those individuals in a family about whom sufficient information was obtained to justify their classification as feeble-minded, insane, etcetera. This information, except in rare cases, was not obtained by field work, but by careful questioning of the County Infirmary keepers, the inmates, and occasionally persons outside of the institution. These incomplete charts are, therefore, only intended to indicate the possible ramifications of defectiveness and dependency and a field of work wherein further investigation would prove exceedingly profitable.

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## TO THE LEGISLATURE OF THE STATE OF MICHIGAN.

At the Legislative Session of 1913 there was passed the following Act:

### ACT NO. 150 PUBLIC ACTS 1913.

AN ACT to create a commission to investigate the extent of feeble-mindedness, epilepsy, insanity and other conditions of mental defectiveness, and to appropriate the necessary moneys for the expense to be incurred by said commission in the performance of its duties.

The People of the State of Michigan enact:

SECTION 1. There shall be a commission created to investigate the extent of feeble-mindedness, epilepsy, insanity and other conditions of mental defectiveness prevalent in the State of Michigan, and to make a study of the causes productive of these conditions.

SECTION 2. This commission shall be composed of the following members: The medical director of the State Psychopathic Hospital at the University of Michigan, the Superintendent of Public Instruction, the secretary of the State Board of Health, and the secretary of the State Board of Correction and Charities. The medical director of the State Psychopathic Hospital is herewith made the executive officer of the commission.

SECTION 3. It shall be the duty of any and all officials in charge of any public, private, religious, charitable, penal or correctionary institution in whose custody are held individuals whose mental condition comes within the scope of investigation of this commission to furnish such information as may be desired by the commission and to keep, during the existence of this commission, such records as it may prescribe.

SECTION 4. This commission shall present to the legislature of nineteen hundred fifteen a printed report embodying the results of its work, together with such recommendations for the treatment and prevention of these conditions as are suggested by their investigation.

SECTION 5. The commission is authorized to appoint such officials and employes as it may regard as necessary to carry on the purposes of this act, and such persons shall be paid such salaries as may be recommended by the commission and approved by the board of state auditors. These salaries and all expenses of the commission, after being duly certified by the chairman or some authorized member of the commission, shall be paid from the general fund of the state. The members of this commission shall receive no compensation for their services, but their actual and reasonable expenses incurred in the performance of their duties shall, after approval by the commission, be paid by the state treasurer on the warrant of the auditor general, on the rendering of their

accounts, out of any moneys to the credit of the general fund not otherwise appropriated. The above payments to be made in accordance with the general accounting laws of the state.

This act is ordered to take immediate effect.

Approved May 2, 1913.

In pursuance of this Act, the commission was formally organized at Lansing on May 18, 1913. The members of the commission at that time were Hon. Luther L. Wright, Superintendent of Public Instruction; Hon. Marl T. Murray, Secretary of the State Board of Correction and Charities; Dr. R. L. Dixon, Secretary of the State Board of Health, and Dr. Albert M. Barrett, Director of the State Psychopathic Hospital. The Commission elected as its officials, Dr. Albert M. Barrett to be chairman, and Dr. R. L. Dixon to be secretary.

On November 15, 1913, Hon. Fred L. Keeler succeeded Hon. Luther L. Wright in the office of Superintendent of Public Instruction and thus became a member of the Commission, and on February 1, 1914, Dr. John L. Burkart, succeeding Dr. R. L. Dixon in the office of Secretary of the State Board of Health, became secretary of the Commission.

The extent of the investigation as assigned by this Act was so comprehensive that the Commission was impressed by the impossibility of conducting the work in as detailed a manner as would be desirable were more time available. It was, therefore, decided to choose certain lines of investigation which could be done thoroughly and would furnish information which would serve as a basis for an estimate of the entire subject.

The plan adopted was as follows:

1. An analysis of the statistics given in periodical reports of the various State Hospitals for the Insane, for a convenient number of years, to ascertain facts relative to the extent of insanity throughout the state, as shown in the movement of population of these institutions, and such other facts as might be of value in determining what conditions influence the occurrence of insanity.

2. A co-operative investigation by all the State Institutions caring for the insane, defective and delinquent, carried through a period of one year, to ascertain (1) The influence of alcohol in the causation of these conditions; (2) The occurrence of syphilis as shown by a systematic use of the Wassermann Test on those admitted; (3) The preparation of statistics of the current admissions for one year relative to sex, age, occupation and residence; (4) A study of the conditions of patients discharged from the hospitals 10 years previously.

3. The determination of the extent of feeble-mindedness and factors related to it, among the inmates of the State Industrial School for Boys at Lansing and the Michigan Industrial Home for Girls at Adrian.

4. An examination of the inmates of County Infirmaries in the state for the determination of the prevalence among them of feeble-mindedness and physical and mental abnormalities.

The headquarters for the work were located in Ann Arbor. Dr. Albert M. Barrett has been in immediate supervision of the work.

The active charge of the work was given to a corps of workers, all of whom had had special training for their positions. Harry W. Crane, Ph. D., was appointed chief investigator and was placed in immediate

charge of the office and field work. There were appointed as assistants in special lines of investigation the following: Adele E. McKinnie, A. B., who had previously been engaged in work in Michigan in relation to feeble-mindedness; Sarah D. MacKay, A. M.; Pauline Buck, A. B.; and Charles Webber.

Active field work was begun in July, 1913.

The work upon the institutions for the insane has largely been in charge of Dr. Crane.

The work among the County Infirmaries was done by Miss McKinnie and Dr. Crane.

The investigations at the Industrial School for Boys at Lansing were in charge of Miss MacKay and Mr. Webber.

The investigations at the Industrial Home for Girls at Adrian were in charge of Miss MacKay and Miss Buck.

The Commission is indebted to the officials of the various state and private institutions for their cordial co-operation in the work, and to the administrative officers in charge of the County Infirmaries for their helpfulness.

During the progress of its work the Commission has held meetings at Lansing and Ann Arbor and the minutes of these are in charge of the Secretary of the State Board of Health.

Respectfully submitted,

ALBERT M. BARRETT, M. D., Chairman,  
Director of the State Psychopathic Hospital.

JNO. L. BURKART, M. D., Secretary,  
Secretary of the State Board of Health.

FRED L. KEELER,  
Superintendent of Public Instruction.

M. T. MURRAY,  
Secretary of the State Board of Correction and Charities.

## CHAPTER I.—THE INSANE.\*

**Prevalence of Insanity.**

In estimating the prevalence of insanity there are difficulties which result from the peculiar nature of the disorder and the lack of definite standards to determine what degree of mental abnormality should constitute insanity. A statistical consideration of the subject can at present only concern those who are or have been in institutional care. The nature of insanity in its social and legal relations makes it probable that at some time or other most of those who are definitely insane seek institutional treatment. The movement of the population of institutions for the insane will, therefore, furnish quite satisfactory information regarding the questions of extent and increase.

On June 30, 1914, there were in the special institutions of Michigan caring for the insane 7,703 individuals. Of this number 7,030 were in the seven State Hospitals for the Insane, 226 were in private institutions and 407 were in County Infirmaries.

Of the entire population of the state, 27 out of each 10,000 were in institutions for the insane. The distribution of these among the institutions of the state is shown in Table 1 of the Appendix. Comparing this rate with that of the other states throughout the country, we find that figures given in the United States Census for 1910 show that Michigan in that year had a rate for insane in institutions of 23.8 per 10,000 of the population. This was considerably lower than the rate of Massachusetts with 34.4, or New York with 31.3. It differed but slightly from the states occupying a similar geographic position: in Illinois, 22.7; in Indiana, 16.7; in Wisconsin, 28.2, and in Ohio, 22.2.

The ratio of the number in institutions to the population in any state is directly dependent upon the facilities which are present for receiving those who apply for admission. In making comparisons between variations in the rate of different states, it must be borne in mind that there are considerable differences in the facilities which states have for caring for the insane.

A very considerable number of insane are present throughout the state outside of institutional care. It is impossible to accurately estimate the number of these under the present conditions of state supervision. Each year there are discharged from the State Hospitals large numbers of individuals who are not restored to their normal mental state. Some of these recover after leaving the institution, many die and some again enter institutional care. At all times there are in the communities many individuals who have been insane and who do not return to institutions. In order to gain some idea as to what becomes of those who are discharged, a study was made of the fate of those who were discharged from the hospitals of Michigan in the four-year period ending June 30, 1904. The results of this investigation are embodied in Diagram No. III, Table 18.

---

\* By Albert M. Barrett, M. D.

DIAGRAM III.

*PRESENT LOCATION  
AND MENTAL CONDITION OF  
667 PATIENTS TEN YEARS  
AFTER THEIR DISCHARGE FROM  
MICHIGAN STATE HOSPITALS.*

<i>LIVING</i> 58.6%	<i>NO DATA</i> 13.6%	<i>DEAD</i> 27.7%
------------------------	-----------------------------	----------------------

*PRESENT  
PLACE OF RESIDENCE*

<i>NOT IN INSTITUTION</i> 63.9%	<i>IN INST.</i> 35.4%	<i>UNKNOWN</i>
------------------------------------	--------------------------	----------------

*PLACE  
OF DEATH*

<i>NOT IN INST.</i> 41%	<i>IN INST.</i> 38.8%	<i>UNKNOWN</i> 20%
--------------------------------	------------------------------	-----------------------

*PRESENT  
MENTAL CONDITION*

<i>NORMAL</i> 45.2%	<i>6.3% QUES.</i>	<i>UNBALANCED</i> 48.4%
------------------------	-------------------	----------------------------

*MENTAL CONDITION  
AT TIME OF DEATH*

<i>UNBAL.</i> 53.5%	<i>10.3% QUES.</i>	<i>NOR.</i> 36.2%
------------------------	--------------------	----------------------

From information concerning 667 cases discharged from the State Hospitals 10 years ago it was ascertained that 219, or 32.8 per cent, had been discharged as recovered; 350, or 52.5 per cent, as improved, and 80, or 12.1 per cent, as unimproved. Of the entire number discharged some 317, or 47.5 per cent, were readmitted to one of the State Hospitals; many were readmitted and discharged several times; 222 of this number remained away a year or more; 56 individuals, or 8.4 per cent of all discharged, had recurrent attacks of their disorder which were treated outside of public institutions.

Of the entire number who were discharged 185, or 27.7 per cent, had died either in or out of an institution. There were 91 individuals regarding whom there was no definite information as to whether they were alive or had died. There remained 391 individuals of whom 129, or 32.9 per cent of those who were still alive, who were living in the institution from which they were previously discharged, and 250, or 63.9 per cent, who were living outside of institutional care. Of this latter group 22.9 per cent were still mentally abnormal.

It can thus be estimated that a very considerable number of unrecovered insane continue to live outside of institutional care for a long time after their discharge.

#### Increase of Insanity.

This phase of the investigation proceeded along two lines. First, a study of the variations from year to year in the number annually admitted to the State Hospitals for the Insane and, second, a study of the variations of those yearly under treatment.

In Diagram I, Table 2 of the Appendix, it can be observed that the total admissions have increased from 1,115 in 1901 to 1,603 in 1914, an increase of 43.7 per cent.

Between 1901 and 1910 the admissions have increased from 1,115 in 1901 to 1,682 in 1910, an increase of 50.8 per cent.

Estimated in relation to the population it was ascertained that the rate of admissions per 10,000 of the population in 1901 was 4.5. This increased in 1910 to a rate of 5.9 per 10,000 of the state's population.

In dealing with total admissions there are included those who may have been readmitted and thus these figures do not represent the actual increase in new cases of insanity. In 1901 the first admissions (Diagram I) were 793, or 3.2 per 10,000, and in 1910 they were 1,200, or 4.3 per 10,000, a rate which still continues in 1914. Admissions of new cases of insanity have increased 62.7 per cent between 1901 and 1914, and the new admissions plus the readmissions of patients who were formerly under treatment has increased 43.7 per cent.

There has also been a marked increase in the number of those annually under treatment. This increase in relation to the population is shown in Diagram II and Table 3 of the Appendix. In the biennial period ending on June 30, 1890, there were treated in the Michigan State Hospitals for the Insane 3,652 individuals. This represented a ratio of 17.44 to each 10,000 of the population. In the biennial period ending June 30, 1914, the number treated was 8,955, which was in a ratio of 30.19 to 10,000 of the population. The increase in numbers treated was 145.2 per cent.

This analysis has shown that there has been a great increase both in

DIAGRAM I

*RELATION OF INCREASE IN FIRST & TOTAL  
ADMISSIONS IN MICHIGAN STATE HOSPITALS  
TO INCREASE IN POPULATION OF STATE  
1901 to 1914*

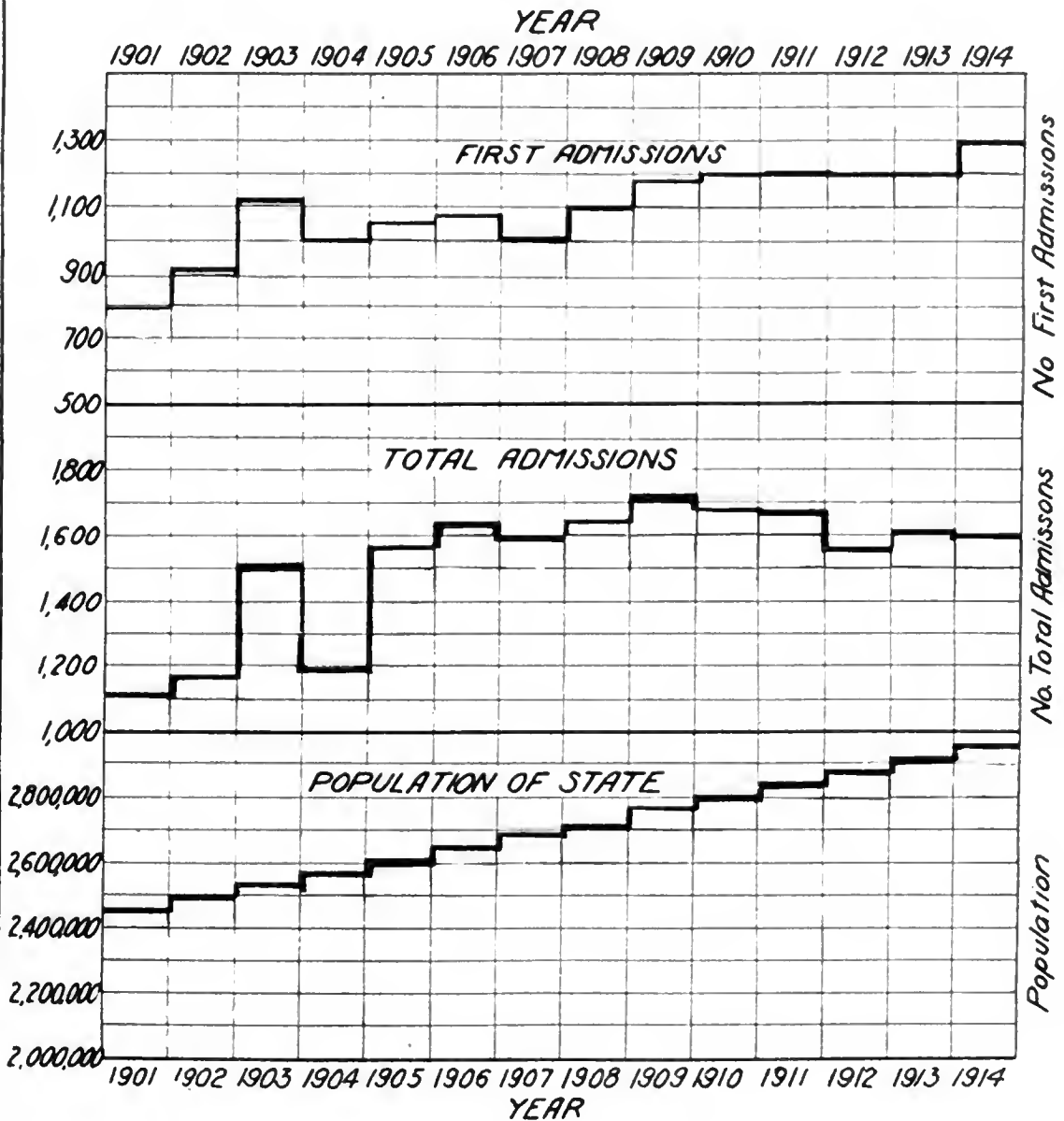
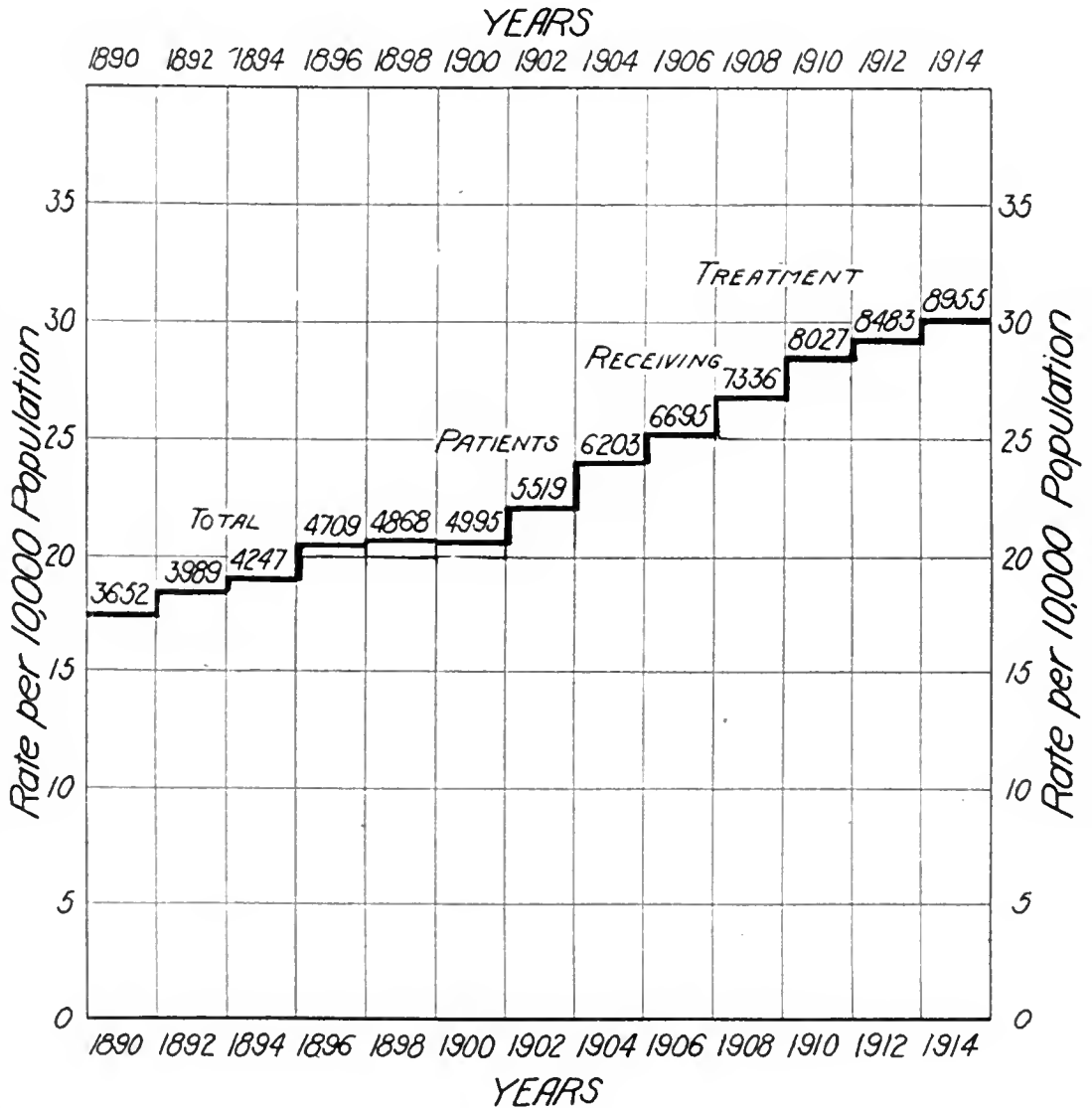


DIAGRAM II.

**TOTAL NUMBER & RATE PER 10,000  
POPULATION RECEIVING TREATMENT  
AT MICHIGAN STATE HOSPITALS  
DURING EACH BIENNIAL PERIOD  
1890 TO 1914**





the admissions of the insane and in those under treatment. Between the census years 1900 and 1910 the population increased 16.1 per cent and the number of first admissions of insanity had increased 51.3 per cent and the total admissions increased 50.8 per cent.

The character of the population of the state has also changed, resulting in an increase of the rate per 10,000 of the population from 3.2 per 10,000 for first admissions in 1901 to 4.3 in 1910. The rate for 1914 remains about the same as that of 1910. The rate of total admissions has increased in the same time from 4.5 to 5.9 per 10,000. An even greater increase has occurred in those under treatment. In both respects these increases have been relatively much greater than the increase of the general population.

#### **Sources of Increase.**

To a considerable degree the increase in the numbers of the insane in institutions is directly related to the increased capacity of the Michigan State Hospitals during recent years. It is also probable that the improvements in institutional administration and a higher intelligence on the part of the people of the state have lessened the aversion which has always been present toward placing insane relatives in institutional care.

In order to ascertain what conditions and influences may be present in Michigan, making it necessary to continually increase the capacity of the State Hospitals for the Insane, the Commission undertook an investigation of certain factors which experience has shown are of importance in their association with insanity. These included the distribution of insanity in Michigan in relation to locality and to the foreign population, and the influence of sex, age, occupation, alcohol and drugs, syphilis and heredity.

#### **Influence of Locality.**

Map I shows the ratio of admissions to the Michigan State Hospitals for the Insane for a period of 10 years, from the different counties for each 10,000 of their population.

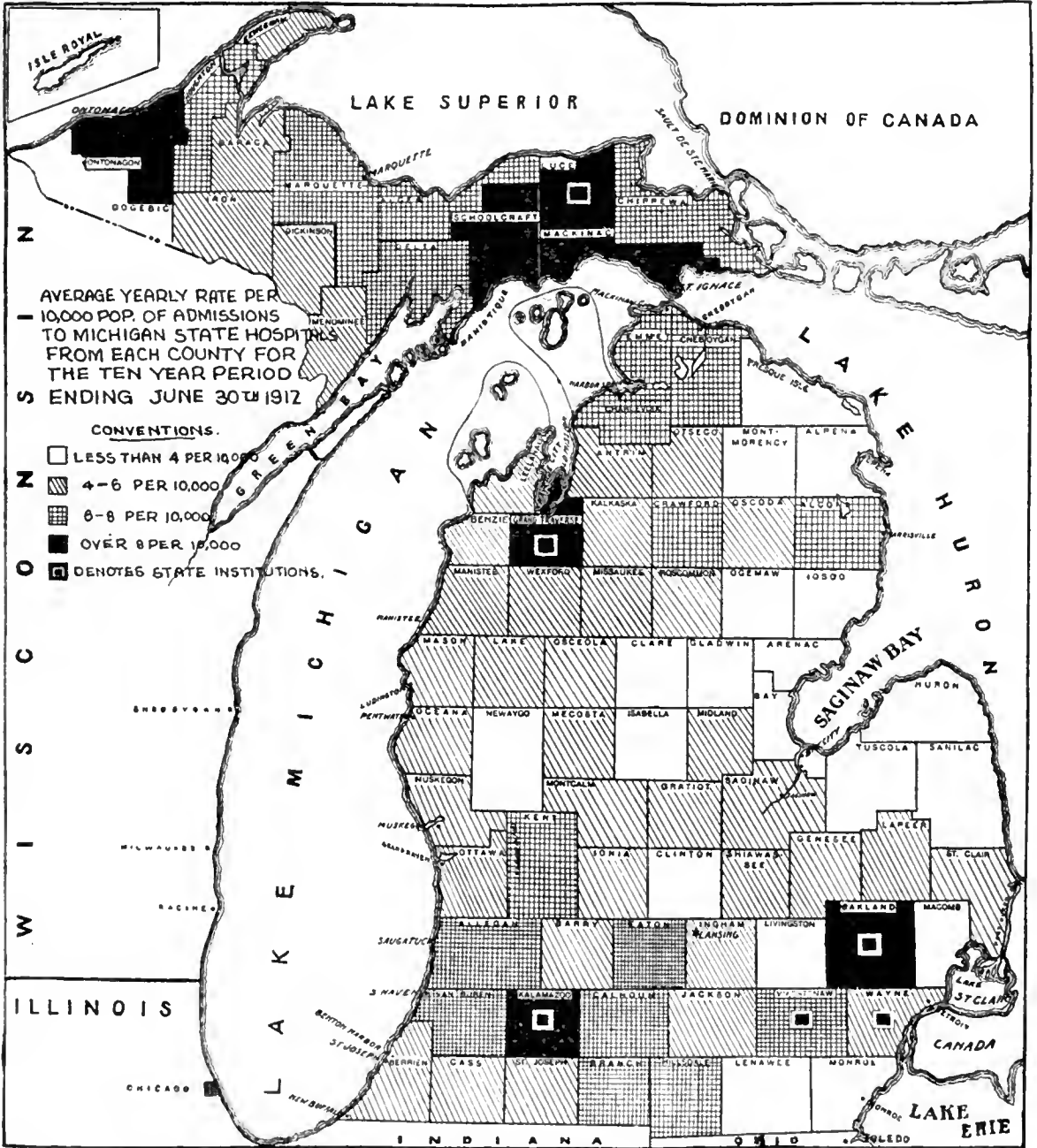
There were 20 counties averaging less than four admissions per 10,000 population, 38 averaging four to six admissions, 18 averaging six to eight and seven more than eight. The highest was Luce county, which had a ratio of 15.6 per 10,000 of its population.

There is nothing in common in the location of the counties having high ratios except that relatively the counties of the upper peninsula have higher averages than those of the lower. It is not a matter of population as the four counties having the largest populations have wide differences in their ratios. Wayne and Saginaw Counties have ratios of four to six. Kent County has a ratio of six to eight and Bay County of six per 10,000. This latter county has a population of 68,238 but a ratio of 2.6, while Eaton County with a population of 30,499 has a ratio of 6.1 per 10,000.

It is important to note that all counties in which are located the larger State Hospitals for the Insane have high ratios. There is no reason for believing that conditions which may be productive of insanity are more prevalent in these counties than in others. These factors are certainly less than in counties of largest population. It seems probable

that in these counties a smaller number of insane avoid commitment to institutions than in other counties. This may be due to familiarity with the administration and benefits of institutional treatment and a more wide-spread interest in the care of the insane resulting from the proximity of a State Hospital and consequently less reserve in placing those who are insane under treatment.

MAP I.

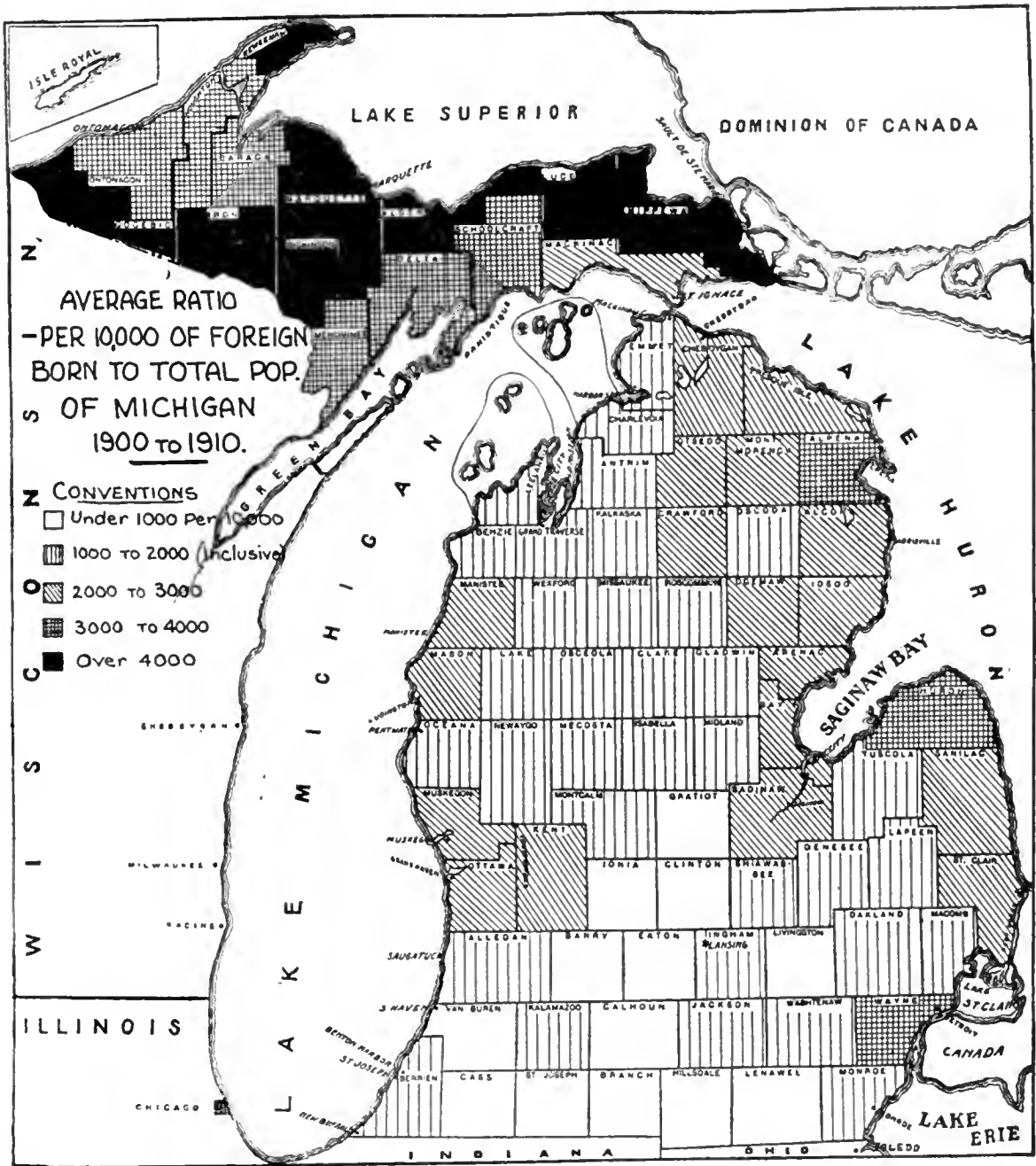


It seems warrantable to conclude that the ratios for the commitments from these counties are a truer index of the actual prevalence of insanity than in counties where the ratios are smaller. The high average of the counties around Luce county is probably due to their high percentage of foreign population and their close proximity to an institu-

tion. The high ratio for Ontonagon county it seems impossible to explain from any information available.

It has not been easy to closely correlate the distribution of admissions to the size of the foreign population in any locality. Map II. Some counties having high ratios of foreign population do not have excessive ratios of admission. In Gogebic county there is a high proportion of foreign

## MAP II

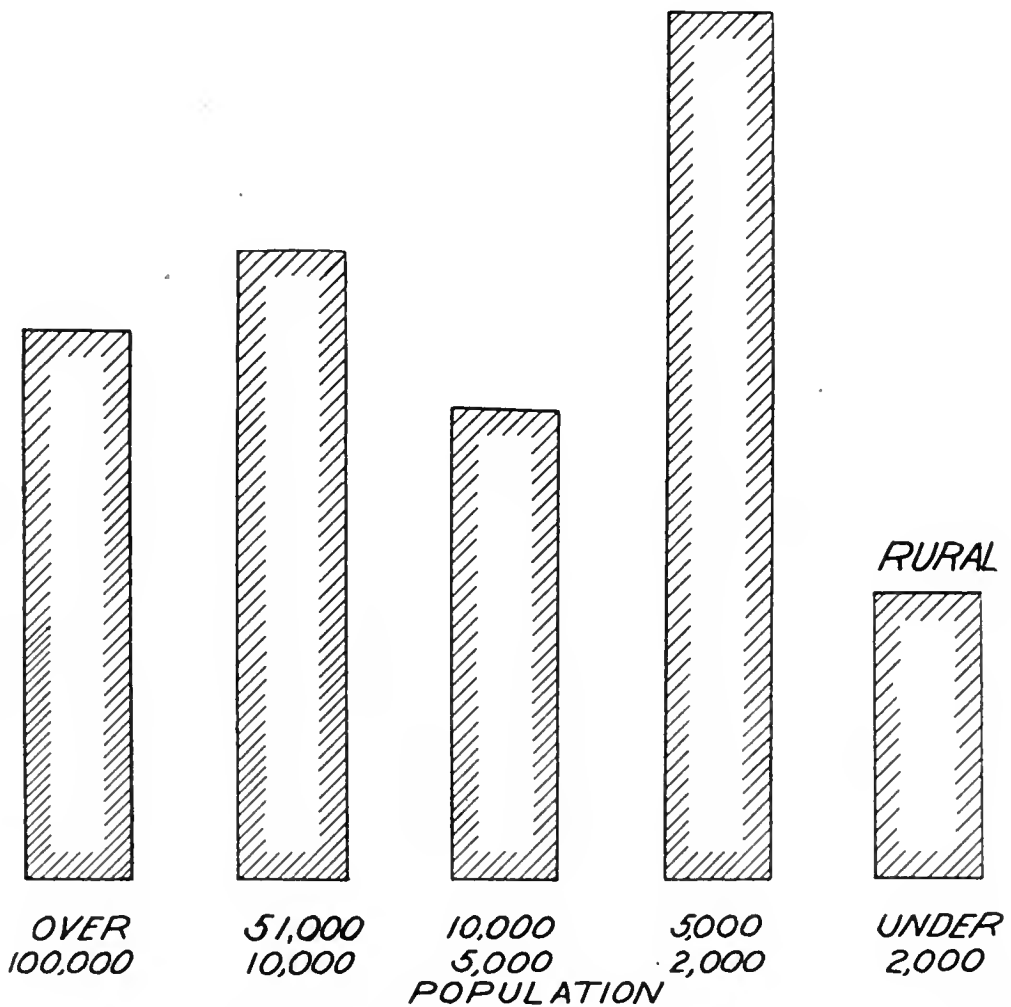


born but a low ratio of commitments. As a rule the counties of the upper peninsula which have high ratios of commitments also have relatively large proportions of foreigners in their population.

The need of placing those who are insane in institutions is always greater in localities which have more complex social organizations and

DIAGRAM V.

*Admissions to MICHIGAN  
STATE HOSPITALS from  
Sept. 1, 1913 to Aug. 31, 1914. Rate  
per 10,000 population. Urban  
and Rural districts.*



it is probable that, in districts where the industries do not demand high degrees of mental responsibility or where the population is widely scattered, there is less occasion for the elimination from among them of those who are insane.

The relation of admissions to institutions to the density of population is given in Diagram V and Table 9. It can be observed that the highest averages of admissions in relation to population come from districts having populations of from 2,000 to 5,000; and the lowest are from strictly rural populations. In relation with this is the fact that 52.8 per cent of the population of Michigan is located in districts having a population of less than 2,500.

The influence of density of population becomes much more important when considered in relation to the prevalence of certain types of insanity. This is shown in Diagram VI and Table 9.

Among the admissions to the Michigan State Hospitals during the year ending June 30, 1914, cities of 10,000 or over contributed 68.5 per cent of the cases of insanity due to syphilis and 66.6 per cent of those resulting from alcoholism or drugs. Both of these causes exert their influence upon the individual from outside and are peculiarly related to environment.

On the other hand, certain forms of insanity seem to develop independent of environment and external factors, the chief influence being a defective physical or nervous stock or abnormal inheritances. In these cases the reasons for the development of the disease are in the individual's personal peculiarities of mind or body. It is to be expected that such types of individuals tend to be where there is a less active struggle. We thus find that 55.4 per cent of all cases of epilepsy and feeble-mindedness and 58.6 per cent of all cases of manic depressive insanity admitted to the Michigan State Hospitals come from districts having a population less than 10,000 and 42.17 per cent of cases of epilepsy and feeble-mindedness and 43.5 per cent of cases of manic depressive insanity come from districts of 2,000 or less. Dementia praecox is slightly more prevalent among admissions from the smaller districts. The same is true of senile dementia, or the insanity of old age, 41.9 per cent of the admissions for this disorder coming from districts having a population of less than 2,000.

#### **Influence of Foreign Population.**

In most investigations into social problems there soon becomes evident the influence which foreign immigration has had in modifying conditions and bringing into the social life inheritances and customs which alter for good or evil the health of the community. The material which forms the basis for the conclusions regarding this phase of the Commission's investigations was obtained from an analysis of information regarding the nativity of 1,773 individuals admitted to the Michigan State Hospitals for the Insane during the year ending August 31, 1914. Table 4 of the Appendix gives the distribution according to country or state of birth of all who were admitted to the Michigan State Hospitals for the Insane during the year ending August 31, 1914.

Of all admissions regarding which information was obtained 535 were foreign born and 1,199 were born in the United States. In Table 5 is shown the ratio per 10,000 of each nationality contributing to the ad-

DIAGRAM VI.

*Forms of INSANITY  
admitted to MICHIGAN STATE  
HOSPITALS from Urban and  
Rural Communities Sept. 1, 1913  
to Aug. 31, 1914.*

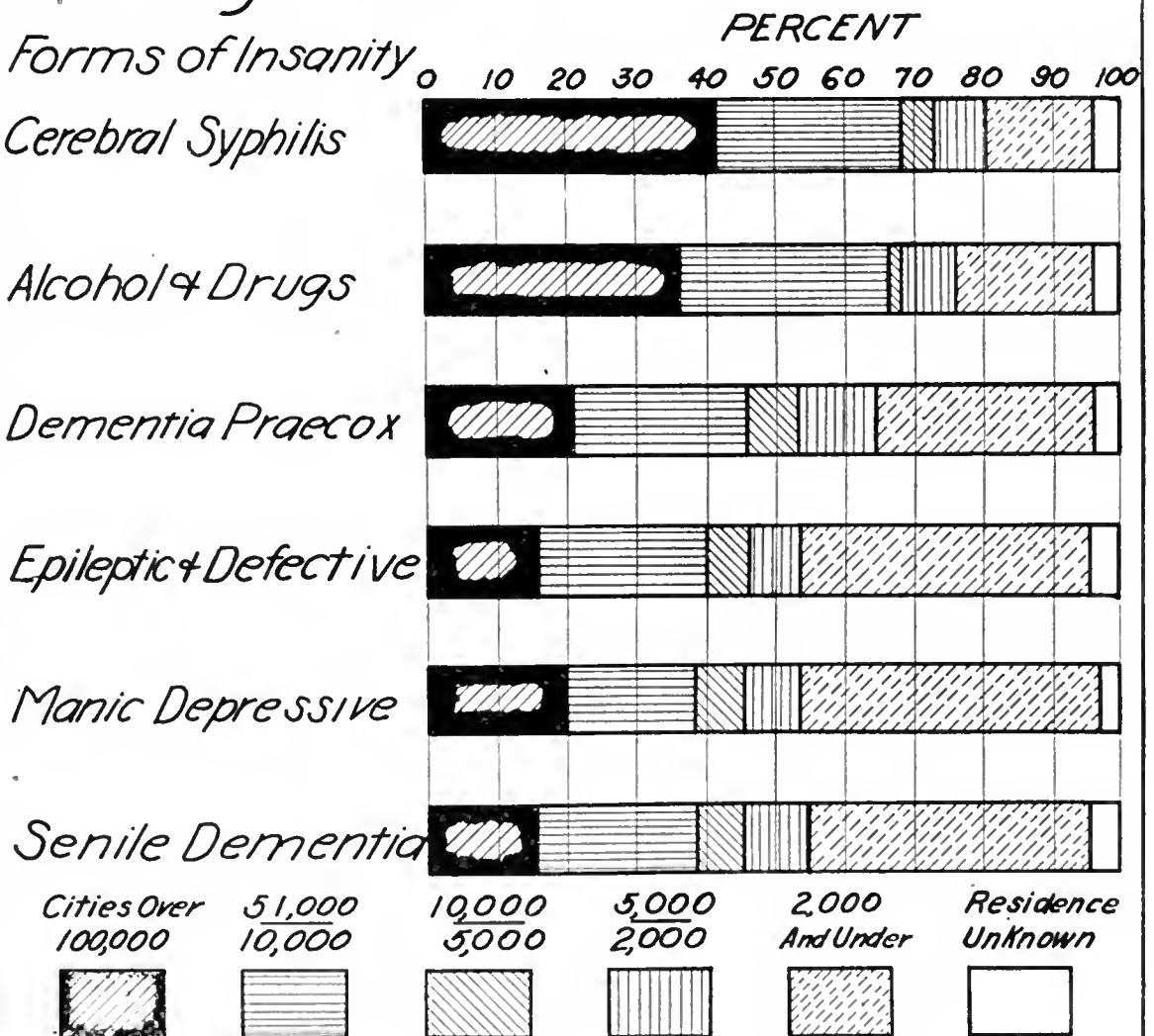
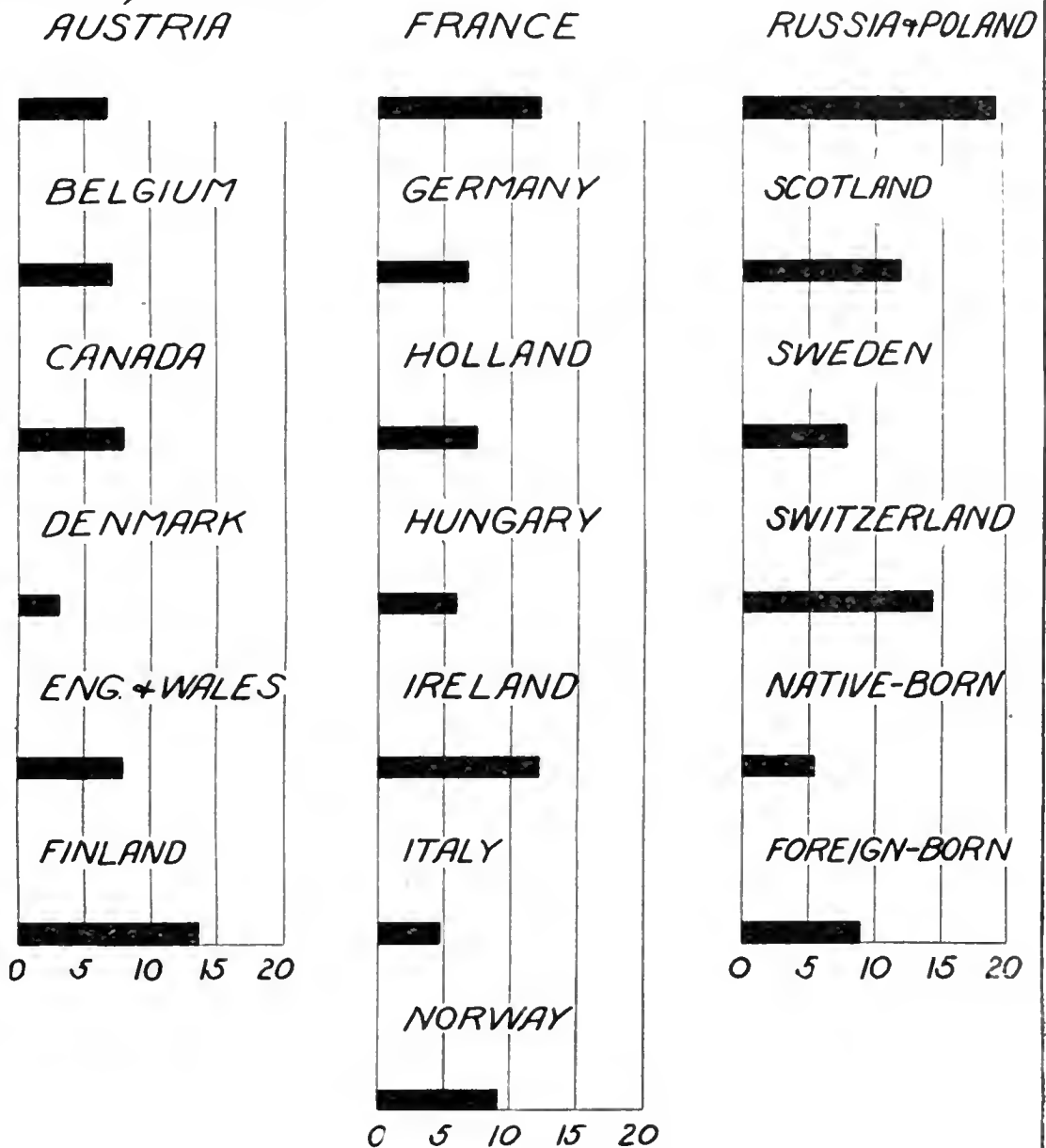


DIAGRAM IV

*Rate per 10,000 population of the Patients of different Nativities admitted to Michigan State Hospitals. Sept 1, 1913 to Aug. 31, 1914.*





missions to the Michigan State Hospitals for one year, based upon the number of that nationality living in Michigan. The figures given in this table are shown graphically in Diagram IV. Among the admissions the native born have a ratio of 5.4 per 10,000 and the foreign born a ratio of 8.9 per 10,000.

The highest rate is that for those born in Russia including Poland. This amounts to 19.2 per 10,000 of those nationalities in Michigan. Among the total foreign born in Michigan natives of Russia and Poland constitute 6.3 per cent. The nationalities which contribute more than the average admission rate for all foreign born are Switzerland, Finland, France, Scotland and Norway. Switzerland constitutes only 0.46 per cent of the total foreign born population but has an admission rate of 14.3 per 10,000 of that nationality living in the state. Finland constitutes 5.2 per cent of the foreign born in Michigan and has an admission rate of 13.7 per 10,000. France constitutes 0.4 per cent of the foreign born in Michigan and has a rate of 12 per 10,000. Natives of Scotland furnish 1.6 per cent of the foreign born population but have a rate of 12 per 10,000. Norway constitutes 1.1 per cent of the foreign born and has a rate of 9.1 per 10,000.

These figures are important only where there is any considerable number of that nationality present in the state and its admissions form a relatively large number among the foreign admissions. In comparison with others in this group Switzerland, France and Norway have only a few admissions to the hospitals and each forms only a small proportion of the foreign born in Michigan.

Tables 6 and 7 give the number of native born among the admissions whose parents were born in various foreign countries. The rate per 10,000 for admissions of those both of whose parents were foreign born was 12.8, while for those whose parents were both born in this country the rate was only 4.8 per 10,000.

The distribution of the foreign born among the counties of Michigan is shown in Map II. (See page 19). The largest relative numbers of foreign born are found in the counties of the upper peninsula and the smallest among the counties of the lower central portion of the state.

It is shown in the analysis that the foreign born in Michigan have a higher frequency of admission according to their number in Michigan than have those of native birth and that the ratio per 10,000 for those who are of native birth but of foreign parentage is 166 per cent greater than that of those whose parents were born in this country.

It is also shown that certain nationalities have a greater liability than others to be admitted to insane hospitals. This is notably the case among the natives of Russia including Poland, Finland and Ireland. The only foreign nationalities in Michigan having a lower admission rate than that of the native born are Denmark and Italy.

There is no doubt but that foreign immigration has had a considerable influence in increasing the number of admissions to the State Hospitals for the Insane in Michigan.

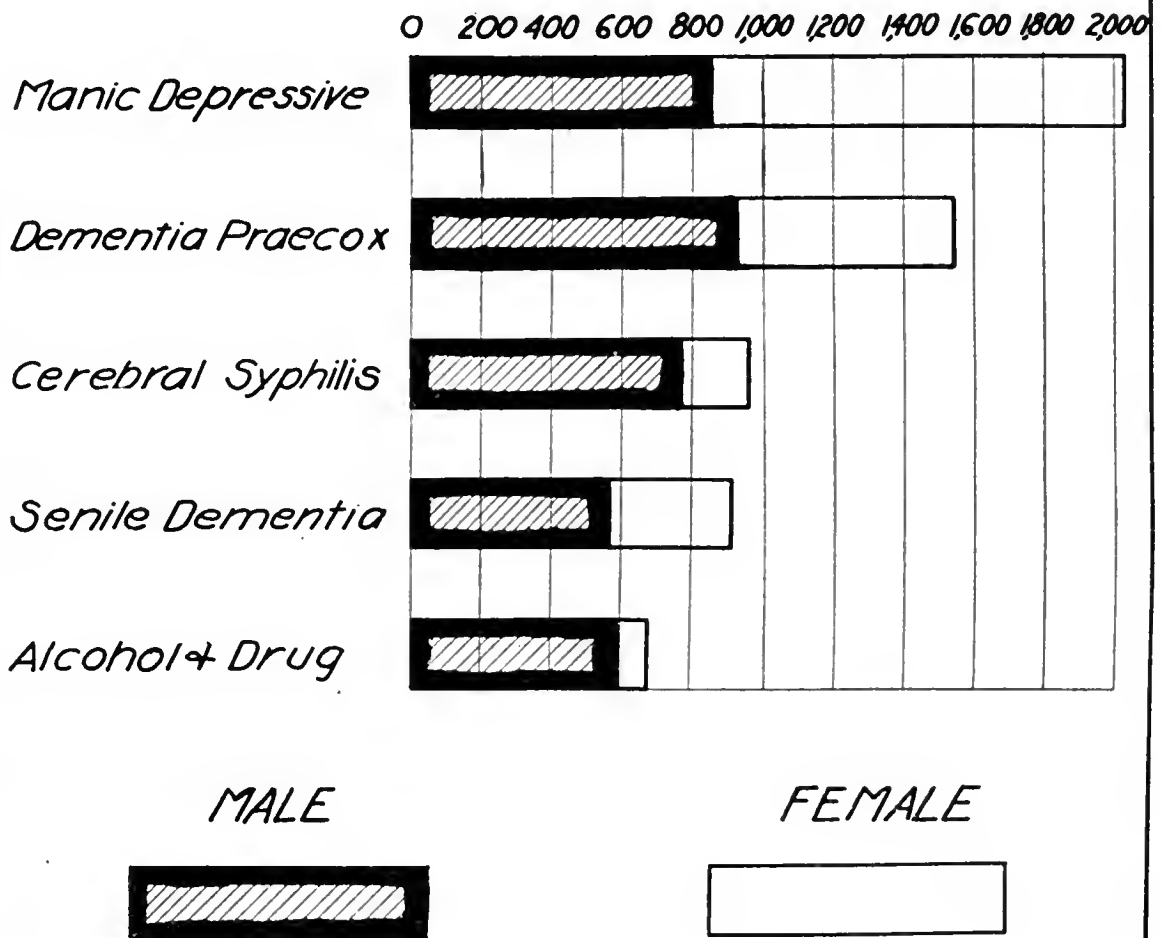
#### **Influence of Sex.**

From whatever standpoint one may analyze the relative frequency of insanity as a whole among the sexes, it is always found that the rate is higher among the males than the females. From figures obtained from



DIAGRAM VII.

*Sex in relation to certain forms of Insanity. Admissions to MICHIGAN STATE HOSPITALS. July 1, 1906 to June 30, 1912 and Sept. 1, 1913 to Aug. 31, 1914.*



the 13th United States Census it may be ascertained that for all of the insane in institutions in 1910 the rate per 10,000 of the population was 20.8 for males and 19.9 for females. The same relative differences exist for all of the insane in this country who were admitted in the year 1910. For males the rate of admission was 7.2 and for females 5.9.

In Michigan the rate for the males admitted during the year 1892 was 6.6 per 10,000 and for the females 6.1. In 1910 the male admission was 9.7 per 10,000 population and the female 7.7. In this interval the relative differences between the rates for males and females was still further increased.

There are certain forms of insanity in which the sexes are present in very unequal proportions. Diagram VII, Table 10. Among 2,009 cases of manic depressive insanity females exceeded the males in the ratio of 1.3 to 1. In dementia praecox the males exceeded the females in the ratio of 1.5 to 1. In cerebral syphilis, including paresis, the males far outnumber the females, the ratio being 3.9 to 1. In senile dementia the ratio of males to females is 1.6 to 1. In insanity due to alcohol and drugs males exceeded females in the ratio of 6.5 to 1.

#### Influence of Age.

The relation of age to the occurrence of insanity was studied from an analysis of the ages of about 20,000 admissions to the Michigan State Hospitals during the period 1890 to 1912. The result of this is given in Diagram VIII, and Table 15 of the Appendix.

A very small proportion, 0.42 per cent of all admissions, are admitted below the age of 15. Between the ages of 15 and 19, the admissions number 4.1 per cent. The admissions between the ages 20 and 29 amount to 19.3 per cent. The age of the largest number admitted is between 30 and 39, when 22.6 per cent are admitted. After this age there is a continued decrease. Between 40 and 49 the admissions amounted to 20.1 per cent. In the period between 50 and 59 there were admitted 13.6 per cent and from 60 to 69 they amounted to 9.3 per cent. After the age of 70 the number admitted was 7.3 per cent of the total.

It was found that relatively the greatest number of admissions occurred during the adult period of life and the largest number were admitted in the decade between 30 and 40. The relative per cents in Michigan agree with those throughout the country. From the figures given in the last census report relative to the age of 56,182 insane individuals admitted in the year 1910 to hospitals of the United States, it may be ascertained that the age period of greatest frequency of admission is between 30 and 40, and at all age periods the relative proportions found to exist in Michigan are maintained.

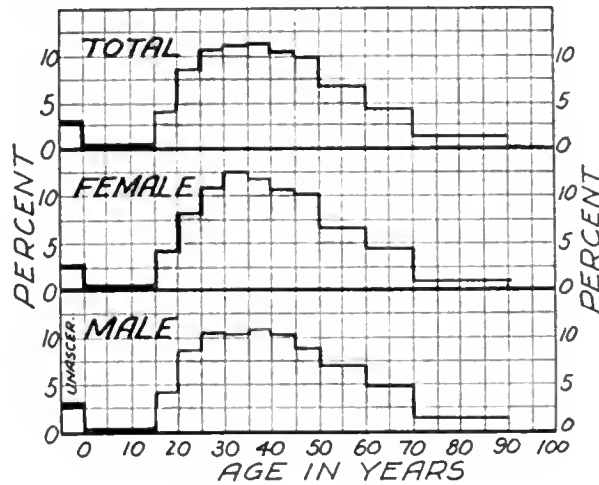
In order to determine whether there was any change in the relation of age to admission, a comparison was made between the ages of admission in 1890-92 and 1910-12. In the former period the age of the greatest frequency was 25 to 30 and in the latter period this had changed to 35 to 40.

In 1892 the age of greatest frequency among males was between 25 and 30, and among females was between 30 and 35. In 1912 more males were admitted in the period 35 to 40 and the age for the greatest frequency among the females was the same as in 1892.

DIAGRAM VIII.

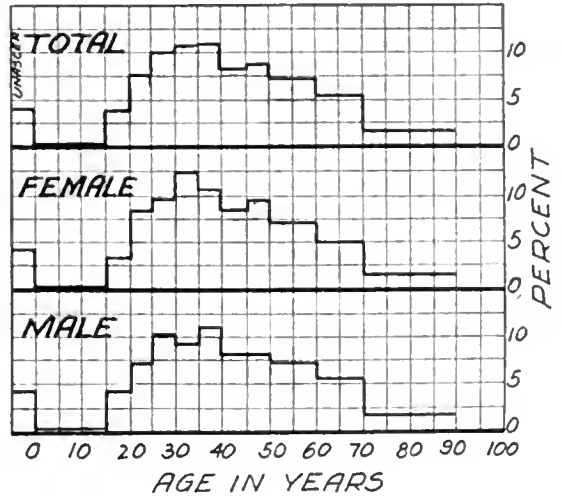
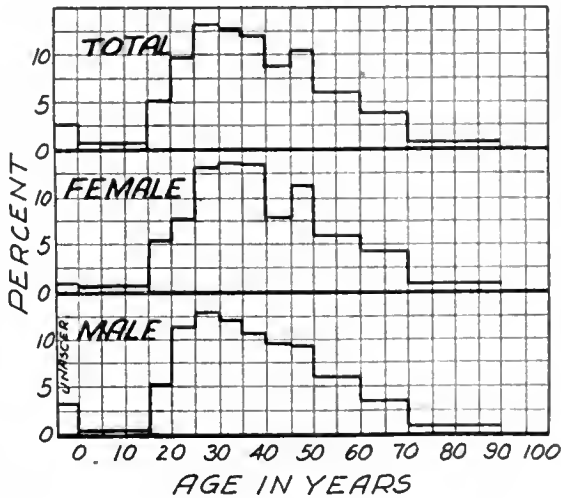
# *AGES OF PATIENTS ADMITTED TO MICHIGAN STATE HOSPITALS. 1890-1912.*

*ADMITTED DURING 22 YEAR PERIOD.*



*ADMITTED DURING 1892.*

*ADMITTED DURING 1912.*



Comparison as to differences in age frequency between the admissions of 1892 and 1912 show that there is a decrease in the admissions of the cases of insanity developing before the age of 50 and a marked increase of those above 50 years of age. In 1892 the admissions after the age of 50 were 30.5 per cent of all admitted and in 1912 they amounted to 39.4 per cent. This was true for both males and females and for first admissions and total admissions.

From this analysis, one must conclude that insanity is most liable to occur in either males or females between the ages of 30 and 40 and that this has shown no change in the past 22 years. There has been a considerable increase in insanity which develops in later adult and early senile years.

#### **Influence of Occupation.**

In Table 16 is given the distribution of the admissions among various divisions of occupations. The lack of any information regarding the proportion of the general population engaged in these occupations makes it impossible to draw any conclusions that may be of value.

#### **Influence of Alcohol.**

The Commission is able in this report to consider the influence of alcohol only as it is a cause or factor in the production of the cases of insanity which are admitted to the State Hospitals for the Insane. It should not escape attention that the numerous cases of alcoholic intoxication and delirium tremens, which are problems of increasing importance in all communities of the state, are also due to the effect of alcohol upon the nervous system. All are mental disturbances due to alcohol and the cases of insanity admitted to the State Hospitals give only a slight suggestion of its importance in its relation to the health of the individuals and the state. No thorough study of its influence could warrant any other conclusion than that it is the most active influence present in our social life for the production of poverty, criminality and physical and nervous degeneracy.

Michigan has no institution for the special treatment of alcoholic habits or inebriety. A statute enacted by the legislature of 1913 makes it possible for this class to enter the State Hospitals for treatment, but only a small number have been admitted under this act. In the vicinity of Detroit two large hospitals, the Wayne County Hospital and St. Joseph's Retreat, annually treat a considerable number of acute and periodic forms of alcoholic intoxication. Only the more prolonged forms of alcoholic mental disorders and definitely insane conditions due to alcohol are treated in any numbers in the State Hospitals for the Insane. Only exceptionally are cases of delirium tremens admitted.

Alcohol was the direct cause of the insanity of 150 individuals who were admitted to the Michigan State Hospitals in the year 1913-14. Alcoholic insanity constituted 8.4 per cent of 1,773 patients admitted during that period. This form of insanity was 6.5 times more frequent among males than females. Diagram VII. (See page 25). It was by no means rare among females, as 13.2 per cent of all cases of alcoholic insanity considered were of this sex.

The greater proportion of alcoholic insanity comes from cities of larger population. Those having a population of 10,000 or more furnish 66.6

per cent of the cases of insanity due to alcohol or drugs. Diagram VI. (See page 22).

The indirect influence of alcohol is shown in the occurrence of alcoholism of more than ordinary degree among the ancestors and families of 9.9 per cent of all cases of insanity admitted for treatment.

The comparative frequency of insanity due to alcohol is considerably less in Michigan than in those states in which the population is largely centered in cities. Alcohol was given as the sole cause in 13.9 per cent of the cases of insanity admitted to the State Hospitals for the Insane in Massachusetts in 1914, and in New York 15.1 per cent of the admissions were due to alcohol.

There has been no marked increase of alcoholic insanity in Michigan during recent years, but its annual contribution does not lessen to any considerable degree. As regards the general use of alcohol among those admitted to the insane hospitals, an investigation of the habits of 846 males admitted to the Michigan State Hospitals for the period of one year showed that 62 per cent were users of alcoholic drinks and 25.7 per cent were total abstainers. Diagram IX, Tables 12 and 13.

Of those who drank, 23.8 per cent were classed as occasional moderate drinkers; 7 per cent drank steadily in moderate amounts; 3.2 per cent drank steadily, but occasionally to an excessive degree; 9.7 per cent could be classed as occasional excessive or periodic drinkers, and 18.3 per cent drank steadily in excessive amounts. Of all those who used alcoholic drinks, 31.2 per cent were more than moderate in their use.

When considered in relation to various types of insanity, the use of alcohol to more than a moderate degree was present in alcoholic insanity, cerebral syphilis including paresis, and senile dementia. Among other forms its use was about equally distributed.

#### **Influence of Drugs.**

There exists a widespread impression, which is substantiated by the experiences of police courts in the larger cities, that addiction to harmful drugs is of great frequency and continually increasing. The investigations that this Commission was able to make in relation to the character of the admissions to the State Hospitals showed that relatively few cases of mental disorders due to drugs were annually treated. In 1914 about 1.7 per cent of the admissions were due to mental disorders resulting from the use of drugs. This gives no adequate information regarding their use among the general population.

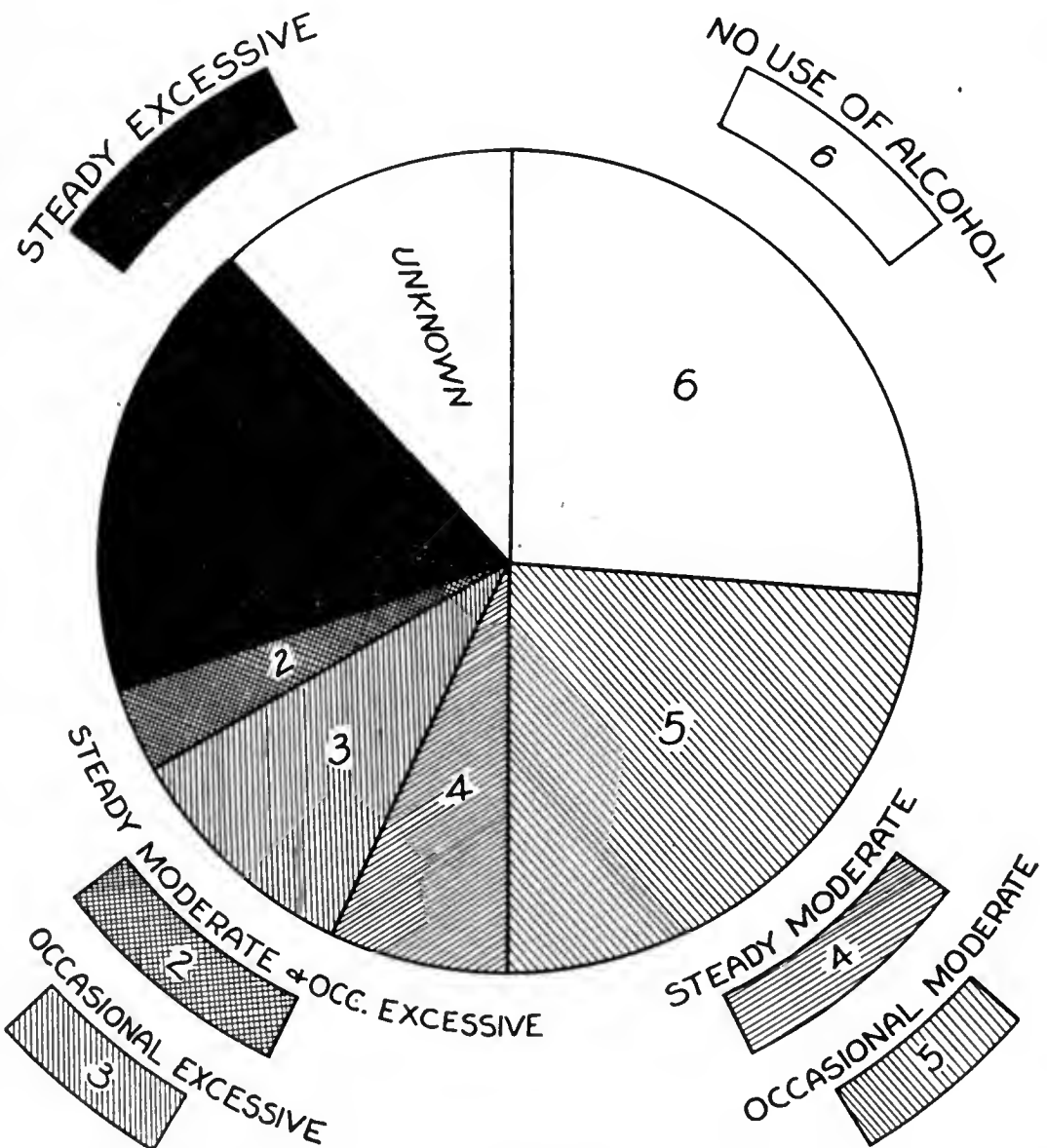
While drug habits lead to varying degrees of nervous and mental impairment, only exceptionally do they result in forms of insanity which make it necessary for their commitment by the authority of the courts.

As a rule, individuals of this class are disinclined to voluntarily seek treatment in institutions where they must be cared for among the insane. The greater number of those who come into the State Hospitals because of the use of drugs are individuals who, apart from the effects of the drug, are mentally abnormal and belong in the group of the psychoneurotics.

The drugs most frequently used were preparations of opium. Usually it was morphine and more rarely heroin. Instances of mental disorders due to cocaine have been extremely rare. It was more common to find those with drug habits using both opium preparations and cocaine.

DIAGRAM IX.

*EXTENT OF USE OF ALCOHOL  
BY MALE PATIENTS ADMITTED TO  
MICHIGAN STATE HOSPITALS.  
NOVEMBER 1. 1913 TO AUGUST 31. 1914.*



It is of importance to note that in a majority of instances the drug habit was started through introduction to the drug by a physician in the course of medical or surgical treatment.

In spite of the regulations relative to the selling of habit forming drugs, patients uniformly tell of having no difficulty in obtaining the drug from drug stores.

### **Influence of Syphilis.**

More than one-eighth of the cases of insanity annually admitted for treatment to Michigan State Hospitals for the Insane are directly caused by syphilis.

Syphilis is the cause of every case of paresis, the most severe and uniformly fatal form of mental disorder which is treated in any considerable number in hospitals for the insane. In addition to paresis there are annually treated a small number of cases of insanity which are due to various other severe pathological changes in the brain produced by syphilis.

In the year 1913-1914 insanity resulting from syphilis constituted 12.9 per cent of all cases admitted to the Michigan State Hospitals and formed the third group in point of largest numbers. It was the direct cause of insanity in 17.5 per cent of all males and 6.65 per cent of all females admitted.

In order to ascertain the general prevalence of syphilis among the insane in institutions a systematic use of Wassermann's Test was made in 1,546 patients admitted during the year 1913-1914. The results of this are shown in Diagram X and Table 14 of the Appendix.

In 21.6 per cent of 940 males who were tested, there were obtained positive reactions and an additional 3.6 per cent were strongly suggestive of the presence of syphilis. In 74.8 per cent of the males the test was negative. Among 606 females who were tested, positive reactions were obtained in 12.7 per cent. Of all admissions 18.1 per cent gave positive reactions, 4.17 per cent were questionable and 77.2 per cent were negative in their reactions.

It is thus shown that besides those admitted for paresis and cerebral syphilis there was a considerable percentage of others who have syphilis although they may be admitted with some other type of mental disorder.

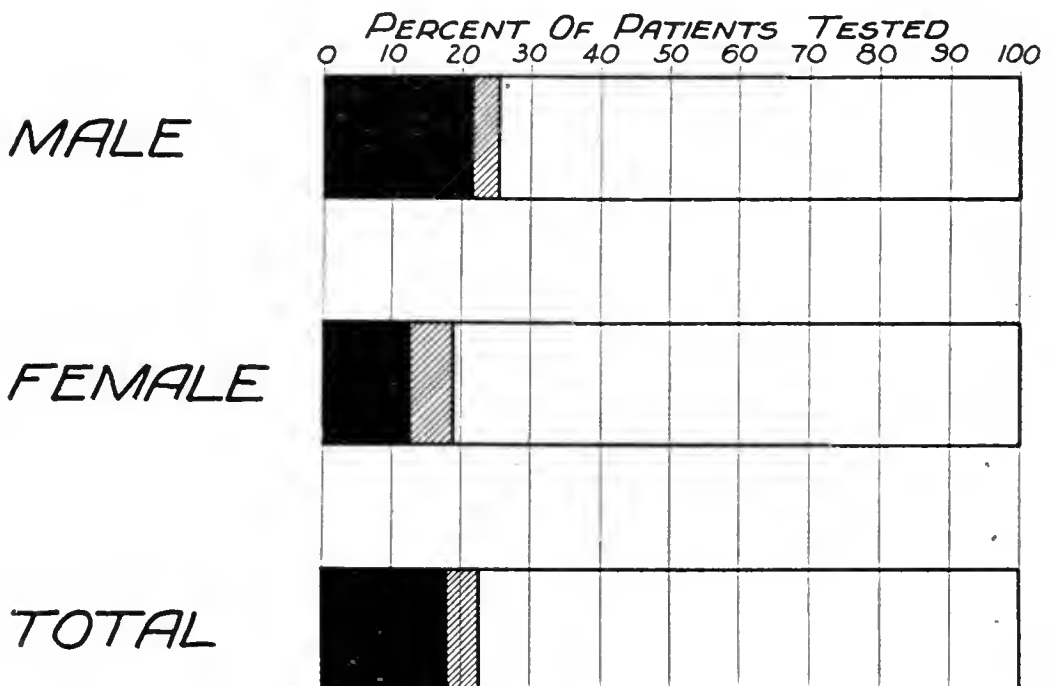
During the past 24 years the proportion of cases of paresis has varied among the males admitted to the State Hospitals for the Insane from 11.1 per cent to 17.5 per cent and among the females from 2.1 per cent to 6 per cent. Within recent years the disease has become more frequent among the total number of females annually admitted.

In its indirect effects syphilis is of extreme importance. Not only is it responsible for the insanity of the patient, but a high percentage of the conjugal mates become infected by the patient or are the source of his infection. It is also responsible for the reduction of the birth rate in the families of the parietic and for a severe impairment of the nervous and physical health of their descendants.

Through the kindness of Dr. R. H. Haskell of the State Psychopathic Hospital at Ann Arbor, the Commission is able to report the results of a

DIAGRAM X.

*RESULTS OF WASSERMAN  
TESTS ON PATIENTS ADMITTED TO  
MICHIGAN STATE HOSPITALS  
SEP. 1, 1913 TO AUG. 31, 1914.*



*WASSERMAN REACTION*

*POSITIVE*



*NEGATIVE*



*QUESTIONABLE*





study made by him on the influence of syphilis and paresis upon the conjugal mate and children of the infected individual. Dr. Haskell says:

Among 53 married individuals who were diseased with paresis there were 17 or 32 per cent of instances in which the wife or husband was infected with syphilis as shown by the Wassermann Test. This figure, though high, must not be taken as representing the whole situation. One wife acknowledging a severe infection had had careful treatment and presented a negative reaction at this time. The first wife of a patient, whose second wife now has a strongly positive reaction, herself died of syphilitic disease. In the case of two female paretics, one husband also has paresis and the other died recently of locomotor ataxia. Since both of these diseases are syphilitic in nature they should be added to the total. There are numerous other factors which might tend to swell this figure but adding only these definite cases one finds in 55 paretic patients a total of 21 mates infected with syphilis.

Separated into sexes, we find that in 49 cases where the husband is paretic, 17 wives are infected with syphilis; in six cases where the wife is paretic, the husband is infected four times.

While these figures are high, they are not greatly higher than other investigators have found and as already suggested probably underestimate rather than exaggerate the true situation. In one study, that of Plaut and Goering, it was found that the other mate showed a positive reaction in 32.6 per cent of 54 cases of paresis, while in our cases the proportion is 38.18 per cent.

Unfortunately we have not yet been able to perform the Wassermann reaction upon a sufficiently large number of children of our patients to warrant drawing conclusions from them. It may suffice to say that Plaut, in the same investigation referred to, found 26 among 100 children in these same families to show a positive Wassermann reaction. Forty-five of these same children showed some defect in their physical or mental makeup although, as a rule, they were intellectually well gifted.

We have also been able to collect 86 cases of married paretics where the anamnesis concerning matters of family life was definitely dependable to allow the drawing of conclusions concerning the matter of sterility, abortions and total number of living born children. The situation is set forth in the following table.

CHILDREN OF MARRIAGES OF PARETICS.

	Total No.	Sterile completely.	Abortions only.	Total number of abortions.	Living born children.
Male general paretics.....	76	22	10	41	110
Female general paretics.....	10	6	1	1	13
Total.....	86	28	11	42	123

This table shows that of 86 marriages 39, or 44.8 per cent, were absolutely childless at the time one of the two mates came into the hospital with paresis. The average number of living born children in this whole group is 1.4 children to each family. If we subtract from both totals of marriages and total number of children two cases with unusually large families of 10 and 12 children respectively, we find the average number of children brought down to 1.2 per family. If we consider only those families with living born children we find an average of 2.24 children per family.

But study of these histories shows that at the time the paretic parent entered the hospital 20 of this extremely small total of 123 children had already died. Usually these deaths were in early infancy, as in the following illustrations: "One immediately and one at the end of the first day," "one at end of first week and the other of hydrocephalus at five months," "one of spasms at five weeks," "one of convulsions in early infancy." Subtracting this number of

20 children already dead and omitting the two distinctly unusual families we find at the time the patients enter the hospital with paresis a total of only 81 living children among 84 families or less than one living child per family.

These observations, showing that 38.18 per cent of the mates of paretics have syphilis; that the children to a large number show either evidences of hereditary lues or signs of congenital weakness, either physical or mental; that the proportion of living children is far below the average and the number of childless marriages is abnormally high; together with the findings of Salmon, that general paralysis in New York State stands eighth in the mortality tables and that one out of every nine male deaths between 40 and 60 is from general paralysis, should give some insight into the magnitude of general paralysis as a public health problem.

### **Influence of Heredity.**

In the causation of insanity two factors stand out above all others. One of these is the quality of the individual and the other is the influences and experiences which act upon him from his surroundings. The causes acting from the surroundings are illustrated in the part played by alcohol and syphilis.

The quality of the individual is determined by forces which exert their influence in forming the material which goes to make up the individual. These forces have their basis in the strain of germ plasm which is possessed by the particular family line from which the individual comes. It is a fact that some individuals may be unharmed by experiences which produce severe mental disorders in others. This must have its explanation in differences in their mental and nervous organization. A somewhat larger proportion of insane individuals show abnormalities of mind or nervous system among ancestors or family relations than do the sane.

Among 4,917 individuals admitted to the Michigan State Hospitals for the Insane during the years 1908 to 1914 and regarding whom there was satisfactory information, there were 65.4 per cent who had among their ancestors or family such hereditary influences as insanity, apoplexy or paralysis, psychopathic abnormalities or alcoholism. Diagram XI, Table 17 of the Appendix.

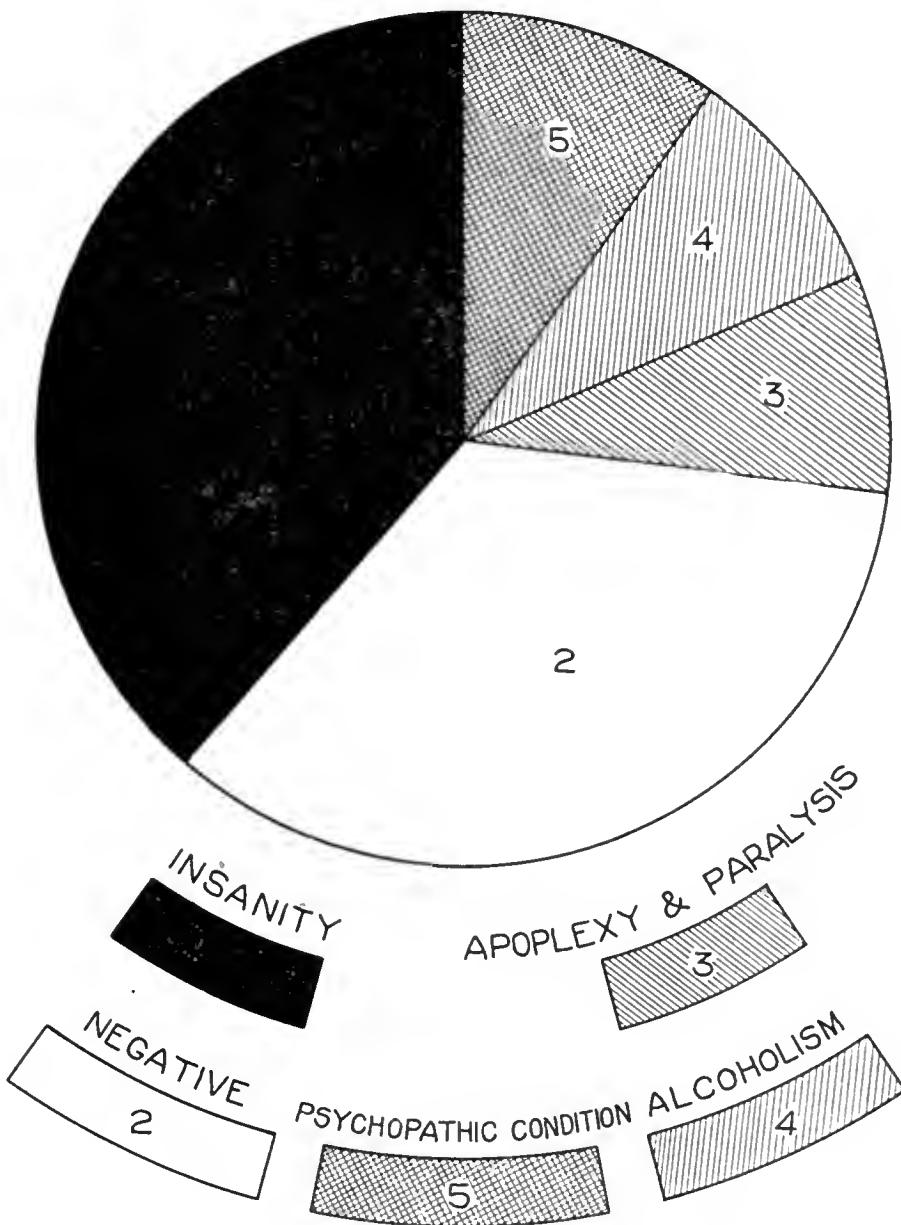
It has been shown by experiment and abundantly confirmed by observation that the transmission of certain qualities follows demonstrable laws and corresponds to the Mendelian Theory that each individual is a sum of unit qualities which may be transmitted in independent form to the descendants. These qualities have a tendency to assert themselves in succeeding generations or may remain latent and reappear again under favorable conditions among the descendants in direct or related lines.

In the analysis of the information that was obtained regarding the distribution of hereditary influences among the families of the insane, it was found that in 58.3 per cent of instances the transmission was direct from parent to child; in 10.04 per cent the abnormalities were present among the grand parents; in 18.81 per cent they were among the uncles, aunts or cousins, and in 17.87 per cent they were among the brothers or sisters of the patient. It is evident that abnormalities of the parents are of far greater significance for the health of descendants than those occurring in other family lines.

Insanity is the most important abnormality which is transmitted from the ancestors or family relations. Among the admissions who had any hereditary influence there were 58.7 per cent who had an ancestor or family relation who had been insane; 12.7 per cent had apoplexy or paralysis

DIAGRAM XI.

*HEREDITARY FACTORS  
OF 4,917 CASES ADMITTED TO  
MICHIGAN STATE HOSPITALS.*



as an inheritance; 15.08 per cent had relatives who showed psychopathic abnormalities and 13.4 per cent had alcoholism among the ancestors or family.

In 39.96 per cent of those patients with hereditary abnormalities one or both parents had been insane. In many instances it was found that several members of a family were insane or in some way showed nervous or mental abnormalities. Among 237 families in which there was more than one member insane or abnormal there were 696 abnormal individuals. These were distributed as follows:

- In 2 families there were 9 who were abnormal.
- In 2 families there were 8 who were abnormal.
- In 1 family there were 7 who were abnormal.
- In 8 families there were 6 who were abnormal.
- In 11 families there were 5 who were abnormal.
- In 31 families there were 4 who were abnormal.
- In 64 families there were 3 who were abnormal.
- In 118 families there were 2 who were abnormal.

It is not difficult to find among the families of the insane striking illustrations of the transmission of insanity through different generations. The accompanying chart of the family of a case of manic depressive insanity shows the occurrence of the same type of insanity through four generations.

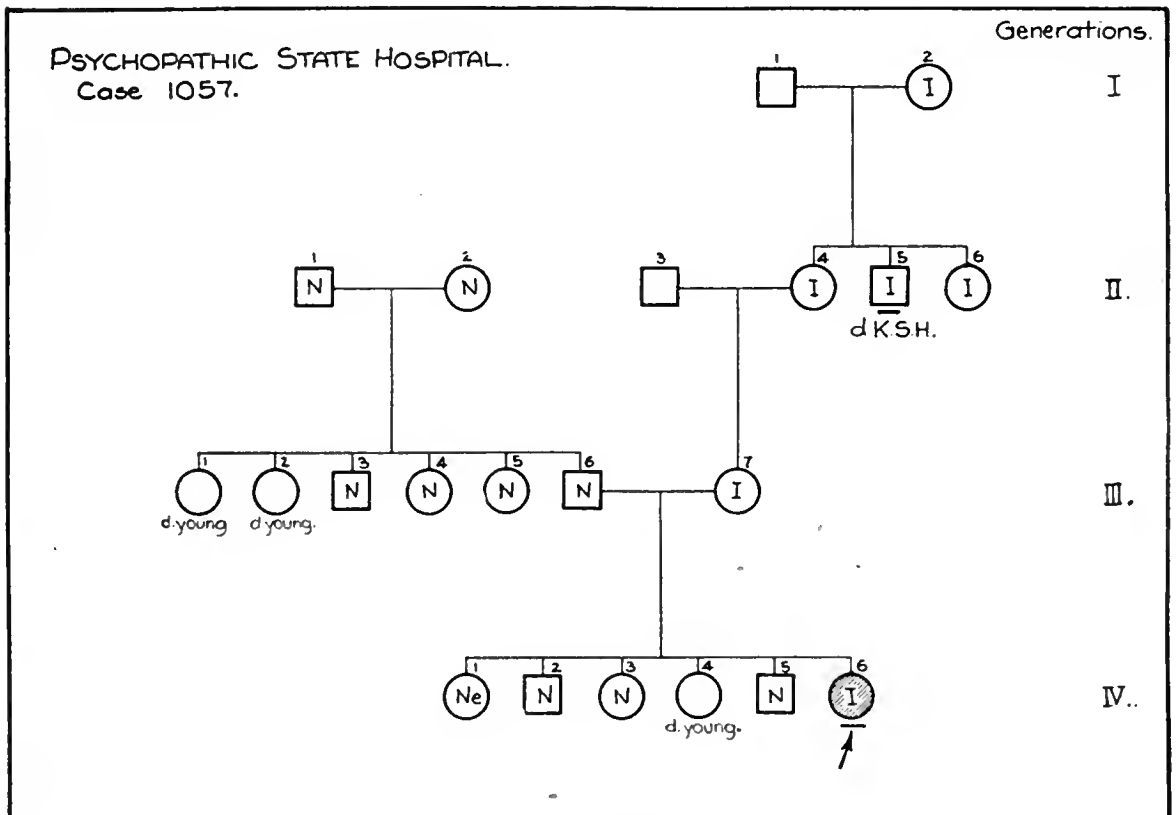


CHART 28.

This chart shows the occurrence of insanity in four generations of one family. The patient (IV, 6) is a case of manic depressive insanity, as was her mother (III, 7). Her grandmother (II, 4) was insane as were two of her grandmother's fraternity (II, 5, 6) one of whom died at the Kalamazoo State Hospital. The patient's great grandmother (I, 2) also was known to have been insane. (For explanation of the symbols used in the above chart see first chart in Appendix.)

The conclusion which is forced upon us from the investigations concerning the influence of heredity in insanity is that it is the most important and far-reaching influence in the production of insanity that we know of, not only in determining the transmissibility of insanity itself but in diminishing the resistance of the individual against harmful external influences and in encouraging the perpetuation of abnormalities and family degeneracy.

With this knowledge, it becomes evident that no person who has been insane should have children and it would be best for them not to marry. The chance of safety, for their own happiness or health of their descendants, is too slight.

### Summary.

The total amount of insanity under treatment in the State Hospitals is composed of a considerable number of different forms of disease, differing in their causes, the symptoms they show, the mode of termination and the nature of the pathological process in the brain. To intelligently understand the influences which are concerned in the production of insanity with a view of instituting preventive measures it is essential to consider the problem in its relation to the proportional part which different clinical types contribute to the total amount of insanity. One may gain an idea of this from Diagram XII in which are arranged groups showing the proportional occurrence of different forms of insanity among 1,773 cases of insanity admitted to the Michigan State Hospitals in the year 1913-1914. These groups have been more or less arbitrarily arranged with the purpose of directing attention to common features in the conditions underlying their occurrence.

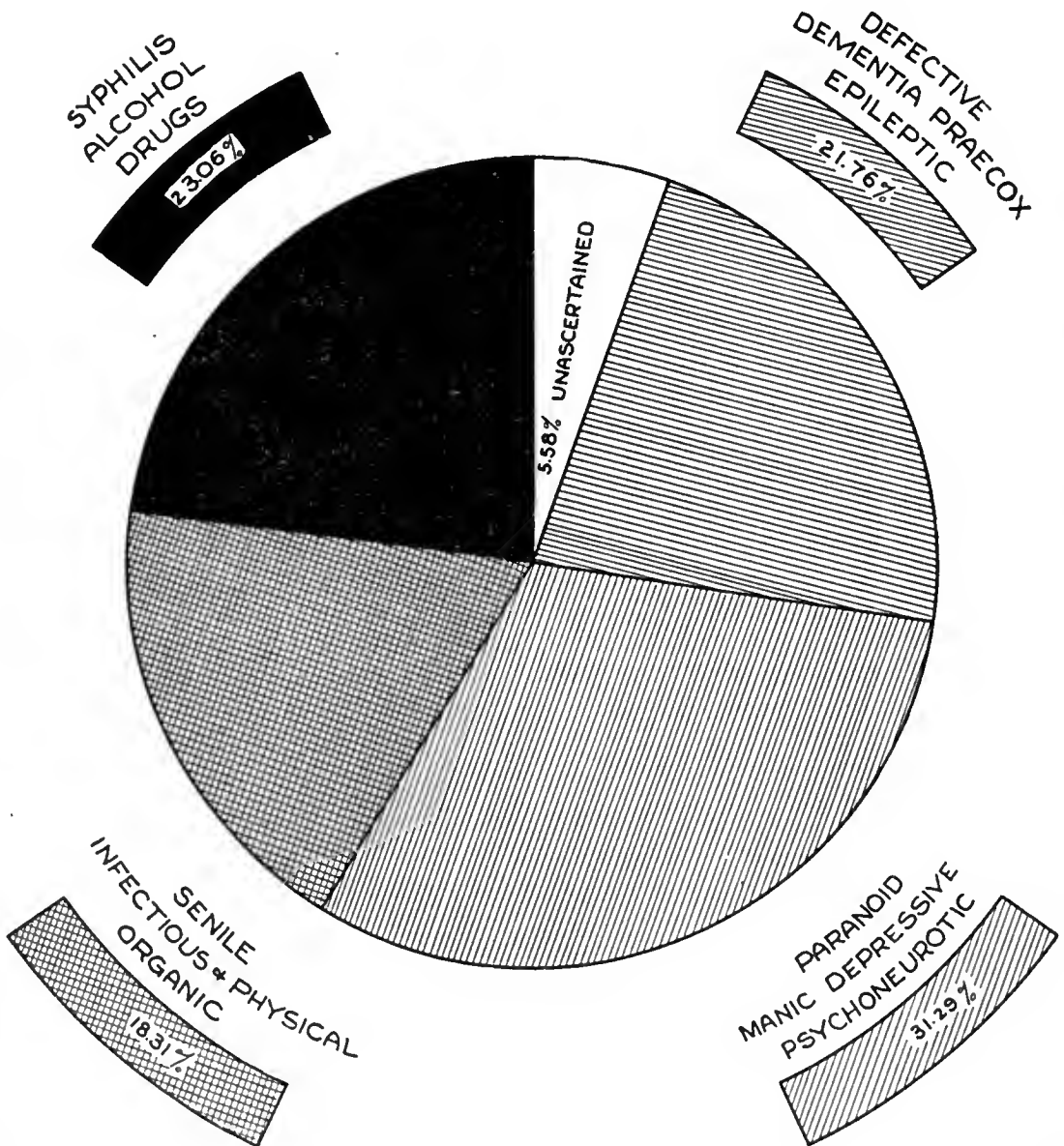
In the group of insanity due to syphilis, alcohol or drugs, there are included 23.06 per cent of the admissions during the year. In this type of insanity we are justified in stating that the insanity of each of these individuals resulted from a cause with which he came in contact through accident or his own choice.

In the second group are placed forms of insanity in which the brain is demonstrably diseased in its structure. It embraces senile dementia, or the insanity of old age, which in this tabulation includes disorders of the brain due to diseased blood vessels. Here also are included other forms of disease of the substance of the brain and those instances due to changes incident to various physical diseases. The entire group contributed 18.3 per cent of all admissions. A very considerable proportion of this group must be regarded as preventable. This is in large part true where diseases of the blood vessels are the cause of the brain disorder. In a large number of instances these result from such agencies as alcohol, syphilis or preventable physical disorders. In the part which infectious and physical diseases contribute to this group it is to be expected that as improvements occur in matters of public hygiene these diseases will lessen in frequency and their relation to insanity diminish.

A third group includes manic depressive insanity, paranoid delusional states and the psychoneuroses, and constitutes 31.29 per cent of the admissions. Common to all of these we have mental abnormalities which arise out of peculiarities of personality or from an unstable nervous organization largely dependent upon inherited tendencies toward ab-

DIAGRAM XII.

*COMPARATIVE FREQUENCY OF  
FORMS OF INSANITY IN ADMISSIONS  
TO MICHIGAN STATE HOSPITALS  
SEP. 1, 1913 to AUG. 31, 1914.*



normalities. With this group the direction of efforts at prevention should be toward restrictions of marriages among individuals who have mental disorders.

In the fourth group are placed several forms of insanity which have but little in common, and regarding whose causes we know little. It includes dementia praecox, epileptic insanity and states of mental defectiveness. Undoubtedly in a considerable number of the instances of mental defectiveness and epilepsy we are concerned with the transmission of abnormalities from the ancestors and any efforts at preventing procreation from abnormal individuals will materially lessen the frequency of these disorders.

### Conclusions.

The conclusions which this summary justifies are that there are certain very tangible influences continually at work in Michigan in the production of insanity and that a very considerable part of the problem that this generation is forced to be interested in is the result of the action of similar forces in past time.

There can be no doubt that the complexity of our present day civilization carries with it demands which make it less easy for the individuals who are less resistant in their nervous organizations to preserve their mental health. As communities become more highly developed it becomes less possible for individuals who cannot hold their thought and conduct within conventional lines to remain outside of custodial care.

There seems to be no reason to doubt that, if the forces which are at work continue without abatement, insanity and physical and nervous degeneracy must increase with even greater rapidity than in the past and, apart from the difficulties and expense of dealing with the situation during this present time, which we have, our future generations must have unreasonable burdens.

The demands put upon the state for the care of the insane are extreme. From 1905 to 1914 the state has paid out \$12,327,259.83 for the maintenance of the insane and for special purposes connected with their care. In addition to this it must be remembered that during the first year of the residence of an insane person in a State Hospital the expenses for the maintenance are borne by the individual counties.

The per capita distribution of the cost of the state appropriations for the care of the insane has increased from 37.7 cents in 1905 to 45.2 cents in 1914.

The peculiar nature of insanity and the special demands for its treatment make it necessary that the insane be cared for in public institutions supported by the state. In Michigan the State Institutions for the care of the insane have long been widely known for their excellency of organization and economical administration, and while the expense for their extension and upkeep is large the necessities of the situation demand that it be adequately met.

At the best the curative treatment of insanity has marked limitations and in spite of advances within recent years one must come to the conclusion that the foremost problem is that of prevention. In this lie great possibilities.

Could the present day direct influence of alcohol and syphilis be abolished the state would be relieved of the care of nearly a fourth of



the cases of insanity now yearly admitted to the Michigan State Hospitals. The beneficial effects which would result in other directions from the removal of these two factors alone are impossible to more than surmise; but without doubt there would be a tremendous lessening in future generations of the insanity which develops on the foundation of a defective nervous and mental organization such as manie depressive insanity, epilepsy and feeble-mindedness.

Another very tangible source of the perpetuation and continued increase of insanity results from the childbearing of those who are feeble-minded or insane. In its relation to feeble-mindedness this problem has been considered elsewhere in this report. As it concerns insanity we have shown that in Michigan 58.7 per cent of those admitted to the State Hospitals had some ancestor who had been insane and in 23.4 per cent of instances where hereditary abnormalities were present one of the parents had been insane.

The remedy for this lies in making it impossible for those who have been insane to marry. It seems to be quite evident that, in spite of the provisions of the laws of Michigan which prohibit the marriage of those who are insane, such marriages continue.

The problem of the prevention of insanity is largely one of education of the citizens of the state to an understanding of the causes of insanity and to a more reasonable regard for the effects of their own acts and influence upon their descendants.

### General Conclusions.

In Michigan the ratio of insane in institutional care is 27 per 10,000 of the general population. This ratio is about the same as that of states having the same general geographic position and less than in certain older states with larger facilities for the care of the insane.

There has been an increase of 145.2 per cent of the insane in institutional care in the past 24 years. In large part this increase is due to an increase of institutional capacity.

There has been an increase of 43.7 per cent in the total admissions to the Michigan State Hospitals for the Insane in the past 14 years.

The annual admission of new cases of insanity has increased 62.7 per cent between 1901 and 1914.

The fact that the ratio of admissions estimated to 10,000 of the population has increased from 4.5 in 1901 to 5.9 in 1910 indicates that the character of the population has changed.

Between 1901 and 1910 the population has increased 16.1 per cent and the annual admission of new patients has increased 51.3 per cent.

The foreign born population furnishes a much larger proportion of the annual admissions to the State Hospitals for the Insane than does the native born. The ratio for 10,000 of foreign born being 8.9 and for native born 5.4.

Native born of foreign parents have a rate of admission 166 per cent greater than the native born of native parents.

Of the foreign population Russia including Poland, Finland, Scotland and Ireland have a higher rate in relation to their numbers in the state than other foreign nationalities.

The highest rates of admission are in districts having a population of 2,000 to 5,000.



All counties having large State Hospitals for the Insane have the highest ratio of admissions, in proportion to their population. It is supposed that fewer insane individuals in these counties escape commitment to institutions owing to their proximity and greater familiarity with institutional administration. There is reason to believe that the rate in these counties approaches the truer number of insane needing commitment than in counties having lower rates.

The counties of the upper peninsula have relatively higher rates in proportion to the population than those of the lower peninsula.

Insanity is most liable to occur between the ages of 30 and 39. The age of greatest frequency in Michigan has changed in the past 20 years from the ages between 25 and 30 to the ages between 35 and 40. Within recent years there has been a great increase in the proportion of admissions of individuals above the age of 50.

In general, males contribute a relatively larger proportion of insane individuals than do females. There has in recent years been a relatively larger increase in the proportion of male admissions than females.

Alcohol is the direct cause of insanity in 8.4 per cent of all admissions to Michigan State Hospitals for the Insane. Alcoholic insanity is 6.5 per cent as frequent in males as females. This form of insanity is, however, relatively frequent among females, this sex contributing 13.2 per cent of all cases of this disease. Of the insane 31.2 per cent are more than moderate in their use of alcoholic drinks.

Drug habits are productive of only a small proportion of the cases of insanity admitted to the State Hospitals.

Syphilis is the cause of 12.9 per cent of the cases of insanity annually admitted to the Michigan State Hospitals. It was the direct cause of insanity in 17.5 per cent of all males and 6.65 per cent of all females admitted. As shown by the Wasserman test 21.6 per cent of all insane have syphilis.

The conjugal mates of 38.18 per cent of all individuals having paresis have syphilis.

In 44.8 per cent the marriages of paretics are childless and their number of living children is abnormally low.

Heredity is the most important and far-reaching influence in the production of insanity.

Of the insane 65.4 per cent have insanity or nervous abnormalities present in their ancestors or families. In 58.3 per cent the transmission was from parent to child. The most frequent hereditary influence is insanity, this being present in 58.7 per cent of those who had any hereditary influence.

The total number of abnormal individuals is strikingly high in families of the insane.

## CHAPTER II.—FEEBLEMINDEDNESS AND EPILEPSY.\*

## Introduction.

For a period of some ten or fifteen years, there has been an ever increasing interest in the problems presented by the feeble-minded class. There has been a growing appreciation of the fact that feeble-mindedness entered in and complicated a great many problems, especially those connected with dependency, crime and sexual immorality. In order to ascertain the extent and the nature of the relationship of feeble-mindedness to juvenile delinquency and dependency in the State of Michigan, this Commission undertook a study of the inmates of the Lansing Industrial School for Boys and the Adrian Industrial Home for Girls, and of all the inmates of the County Infirmaries in the state. Before turning to the discussion of these investigations, which are found in other sections of this chapter, it is necessary to first discuss the general nature of feeble-mindedness, and the problem which it presents.

Feeble-mindedness is defined by Tredgold as "a state of mental defect from birth, or from an early age, due to incomplete cerebral development, in consequence of which the person affected is unable to perform his duties as a member of society in the position of life to which he is born." This definition is a general one, embracing all degrees of feeble-mindedness. There are in common acceptation in this country, three terms used to express differing degrees of feeble-mindedness: idiocy, imbecility, and the moron group.

A clear idea of the extent of the defectiveness of individuals in these different groups may be obtained by comparing their mental development with that of normal children of different ages. The idiot is a feeble-minded individual whose mental development has never progressed beyond the point attained by the normal child at the end of its second year. The mental development of those classed as imbeciles corresponds to that of children from three to seven years of age. The moron group represents all the feeble-minded whose mental development is greater than that of a child of seven. The morons are "persons who may be capable of earning a living under favorable circumstances, but are incapable from mental defect existing from birth or from an early age of competing with their normal fellows, or of managing themselves and their affairs with ordinary prudence."\*\*

It will be seen from these facts that while the idiots and the lower grades of imbeciles are so defective that their permanent care is necessary, yet they are not a class which will tend to propagate. It is the high grade imbeciles and the morons who, though capable of contributing either partly or in whole to their own support, yet are the types which menace society with the increase of their kind.

Environmental conditions existing during the embryonic period or the early years of an individual's life, or accidents happening during this

\* By Harry W. Crane, Ph. D., in collaboration with Miss Adele E. McKinnie and also, for the section on Feeble-mindedness in Relation to Juvenile Delinquency, with Miss Sarah D. Mackay and Mr. Charles Webber.

\*\*Definition suggested by the Royal College of Physicians of London and adopted by the British Royal Commission on the Care and Control of the Feeble-minded, to describe the highest grade of feeble-mindedness.

same period may result in the feeble-mindedness of that individual. Yet all the authorities on the subject agree that feeble-mindedness more often is the result of a morbid heredity than of environmental causes. The degree to which inheritance dominates environmental influences as a cause of feeble-mindedness is variously stated. However, Goddard, Davenport, and Tredgold agree that in at least 80 per cent of the cases of feeble-mindedness heredity is the dominant cause. Dr. Goddard has found that of the cases cared for in his institution, 65 per cent were from parents, either one or both of whom were feeble-minded.

The consensus of opinion is that the Mendelian law is in the main applicable to the inheritance of feeble-mindedness. The most definite portion of the law which applies to the inheritance of feeble-mindedness is that which refers to the mating of two feeble-minded individuals. The probable result of such an union would be offspring all of whom were feeble-minded. Since feeble-mindedness is so largely the result of hereditary factors, procreation by feeble-minded individuals should be prevented.

But what is the problem of feeble-mindedness in Michigan? It is desirable to know the extent of feeble-mindedness in the state, the means being used for its control, and the adequacy of such means.

It is known that on the 30th of June, 1914, there were in the Michigan Home and Training School, 1,141 individuals of defective mentality. Of this number 324 were also epileptic. On this same date, there were on the waiting list of this institution 165 individuals who were in no other public institution. Of this number, 34 were epileptic. There were at the Michigan Farm Colony for Epileptics 24 individuals. Of the patients who were in the State Hospitals for the Insane (including the Wayne County Asylum), 196 of the males and 157 of the females were feeble-minded, while 260 more of the males and 148 more of the females were epileptic. Moreover, during the year ending September 1, 1914, there were admitted to the Michigan State Hospitals for the Insane 77 defectives and 99 epileptics. There were also at St. Joseph's Retreat eight male and 14 female epileptics as well as seven males and 20 females who were feeble-minded. At St. Anthony's Home there were eight males and 16 females who were feeble-minded. The investigations of this Commission have shown that of 3,334 County Infirmary inmates 710 were feeble-minded and 114 more were epileptic. Also that of the 386 girls at the Adrian Industrial Home at least 131 were feeble-minded, while of the 809 boys at the Lansing Industrial School, there were at least 171 who were feeble-minded. The extent of feeble-mindedness in the community at large was indeterminable by the Commission because of the limited time at its disposal.\*

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\*The supervisors of each township and ward in the state are required by law (section 4637 C. L. 1897) to make a report to the Secretary of State of "the names of all insane, deaf and dumb, dumb, blind, epileptic and idiotic persons in his township or ward." These reports for the year 1914 show that besides the number we have found in the County Infirmarys of the state there were at least 278 feeble-minded males and 17 probably feeble-minded males; 165 feeble-minded females and 21 probably feeble-minded females of whom 127 were child-bearing age; 141 epileptic males and 71 epileptic females of whom 52 were of child-bearing age, who were living out of institutions.

In considering these figures several things must be borne in mind. Some of the names given in these reports were probably also included in the number given on the waiting list of the Lapeer Home and Training School. These lists of names are incomplete, as in many instances only the more marked cases of feeble-mindedness are reported. These lists are also inaccurate. Oftentimes the individuals making the report are unable to distinguish between cases of insanity and feeble-mindedness. In many other cases deaf and dumb individuals who were clearly feeble-minded have been reported as "intelligent." However, despite inadequacies and inaccuracies these figures do indicate that there are a considerable number of feeble-minded and epileptic individuals who are at large in the community.

Michigan has realized the fact that feeble-mindedness is transmissible from generation to generation and consequently has adopted measures to prevent procreation. It has laws prohibiting the marriage of a feeble-minded or an epileptic individual and inflicting heavy penalties upon any one a party to, or aiding such a marriage. However, such laws are not enforced, nor is there a sufficient public sentiment to demand their enforcement. Even at the present day, we find public officials instrumental in effecting such marriages.

However, even were there the strictest enforcement of these laws, yet the illicit propagation of the feeble-minded would not be prevented. Under our present system, which makes the marriage of defectives an easy matter, there are numbers of unmarried feeble-minded women bearing children. Thirty per cent of the unmarried feeble-minded women in the County Infirmaries had had children. If restrictions against marriage were enforced, it would merely mean that these illegal unions would be increased.

Michigan also recently enacted a law authorizing the sterilization of its insane and mentally defective. This law, however, is inadequate from two standpoints. It limits the application of this means of preventing the propagation of the feeble-minded class to those who are in institutions and therefore least likely to reproduce. Moreover, very

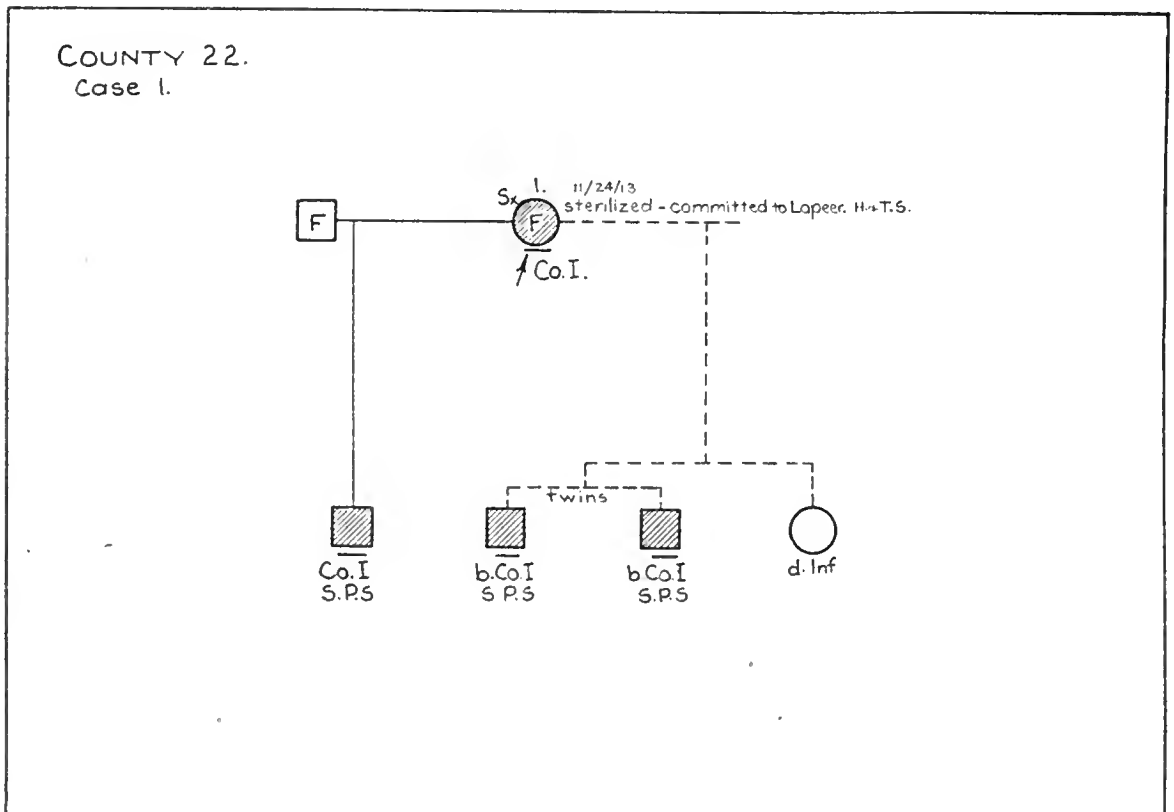


CHART 6.

This woman (1) was sterilized under the new Michigan State Law, 11/24/13. She is the typical moron, a big, strong, healthy girl, except for venereal infection. She had one child by her feeble-minded husband, which was taken from the County Infirmary to the State Public School. Her other three children were illegitimate, two of them born at the County Infirmary and taken to Coldwater. She is now beyond all possibility of doing harm to society by the propagation of her kind. (For explanation of the symbols used in the above chart see first chart in Appendix.)

little advantage has been taken of the right given by this act to prevent procreation.

In only two of the instances of feeble-mindedness encountered in the County Infirmaries had sterilization under the terms of this act taken place. That there was indeed need to prevent procreation in each of these cases is clearly shown in charts 6 and 27. However, there are a

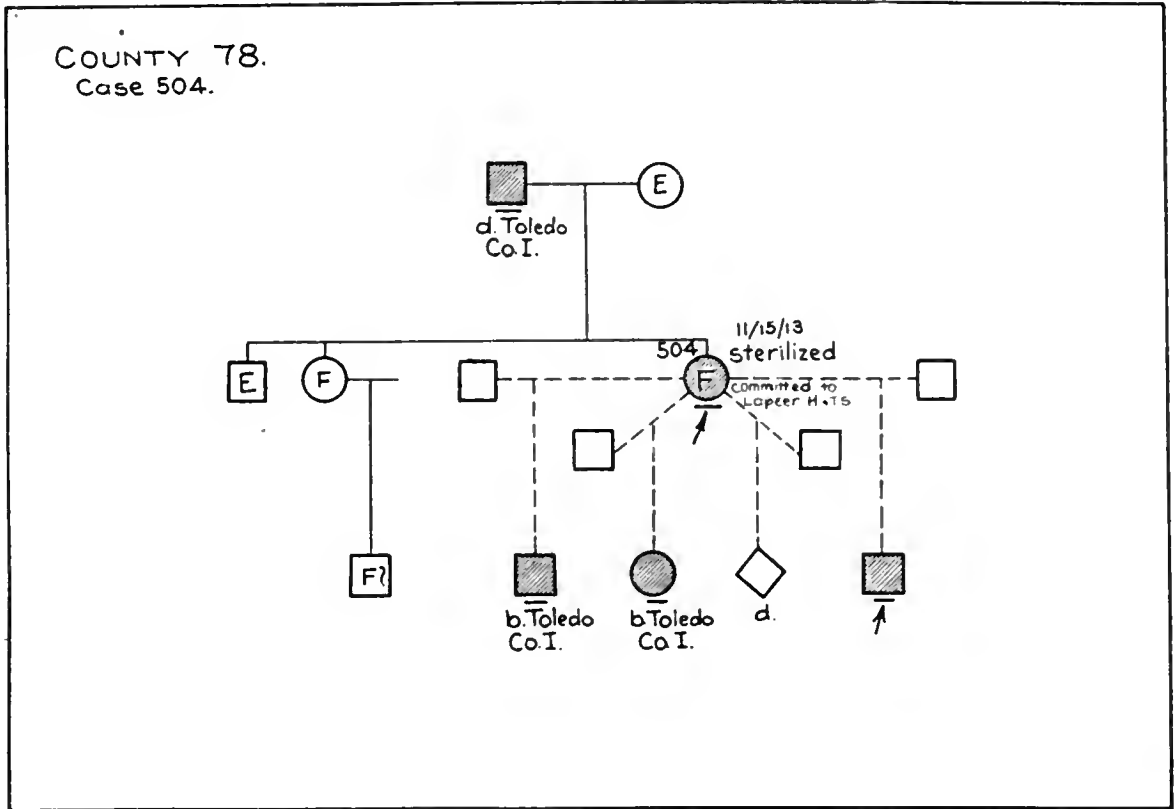


CHART 27.

This woman of 24 years who has the mentality of a girl of 7 is a typical case of the feeble-minded woman who is irresponsible sexually and no doubt exploited at every turn. She has had four illegitimate children, two born at the Toledo County Infirmary and her last one born at the County Infirmary where she is now resident. She was sterilized 11/15/13 and is awaiting her admission to the Lapeer Home and Training School. (For explanation of the symbols used in the above chart see first chart in Appendix.)

great many women, as some of the charts presented later clearly show, whose fertility was an equal menace to society. There are several reasons for the limited extent to which the remedy of sterilization has been used in Michigan. Shortly after the passage of the state law authorizing this operation, a decision of the Supreme Court of New Jersey declared a very similar law unconstitutional. As a result, this decision and a consequent temerity of the medical profession of this state, has rendered the Michigan physicians loath to perform the operation. There are also a considerable number of people who feel that the act of sterilization, while preventing procreation, is a menace to society in that, by removing the restriction of sexual intercourse caused by fear of the possibility of consequent offspring it would tend to increase promiscuity and spread disease. Whether or not this argument is valid cannot be proved by any evidence at hand. The opposition of still another group of individuals is motivated by the sentimental feeling that we have no right to remove a God-given right. Fortunately, this feeling which

places the individual's gratification above the social welfare, is growing weaker and weaker. However, due to a doubt as to the legality of sterilization and to a public opinion that does not yet seem inclined to accept this preventive measure, the law authorizing the operation in this state is practically a dead letter.

Michigan also has attempted to segregate the feeble-minded members of the state. At the present time, however, its institution for the special care of this class is crowded to the limit and has a large waiting list. There are about a fourth of the boys and about a third of the girls in the juvenile reformatories who are feeble-minded and in a very few years will be turned out into the community at large. There are about one fourth of the inmates of the County Infirmaries of the state who are either feeble-minded or epileptic and who are neither adequately nor permanently segregated.

Since our marriage laws are not enforced, and since, if they were enforced, the propagation of the unfit would not be prevented, and since prevention by the means of sterilization has not been and probably will not be taken advantage of, the one method that stands out clearly as the most effective means of preventing the increase of our feeble-minded class is increasing the extent of the segregation of its members. In the following sections on feeble-mindedness in relation to delinquency and dependency are given facts indicating that an especial effort should be made to permanently segregate the feeble-minded women of child-bearing age.

## FEEBLEMINDEDNESS IN RELATION TO JUVENILE DELINQUENCY.

### Introduction.

The task which the Commission assumed in regard to the Lansing Industrial School for Boys and the Adrian Industrial Home for Girls was primarily that of determining the number of feeble-minded children in these two institutions. Yet in conjunction with this work, it attempted to gain other information which might have a bearing either upon the mental condition of the children or upon their delinquency. Information was sought concerning the school history, the physical condition, the employment record and the delinquent record of the inmates themselves. An attempt was also made to ascertain the delinquent and dependent record, the alcoholic and sex habits, the physical condition and marital condition of the parents. It was felt that facts of this nature, as well as any similar facts, which could be obtained concerning the other relatives, might have had either an environmental or hereditary influence, or both, upon the children.

### Mental Status.

Turning first to the mental classification of the inmates of the schools: Each inmate was tested by the Binet method. Briefly giving the facts—as based upon the tests—it can be conservatively stated that of the 809

cases at the Lansing Industrial School, 171 or 21.34 per cent fell definitely and clearly in the feeble-minded group. The same series of tests conducted at the Adrian Industrial Home showed that 34 per cent of the inmates were plainly feeble-minded. The detailed figures from which these percentages are obtained are given in Tables 19 and 20 on Page — of the Appendix. It must, however, be emphasized that these figures are obtained from a somewhat arbitrary application of a fixed test. As a result of this method, and the inadequacy of the test as a means of determining the mental status of the higher grade defectives, the figures above given are, undoubtedly, much lower than they should be.

For this reason, another grouping of all the inmates of each school was determined upon. It was decided that each investigator should, in addition to the information given by the Binet Test, use such personal impression as he could gain from his contact with, and study of, each individual whom he tested as an aid in determining whether or not this individual belonged to the Normal or Feeble-minded Group. As might be expected, proceeding in this way, the investigators found many cases which they were unwilling to place in either the Normal or the Feeble-minded Group. There were a number of individuals who tested too low to be classed as normal, yet whose reaction to the test questions and to the investigators, when taken into consideration with such facts as excessively bad environmental conditions, recent immigration to this country from non-English speaking countries, etcetera, made it seem impossible to class as feeble-minded. There were other cases who tested just too high, according to the arbitrary Binet standard to be classed as feeble-minded, yet whose reactions were indicative of inherent mental defectiveness. Clearly such cases ought not to be classed as normal.

As a result of these considerations, the following five groups were finally decided upon:

Normal, Near Normal, Backward, Feeble-minded and Subnormal.\*

On this basis of division, we find the following distribution of the inmates:

#### LANSING.

Group	Number	Per cent
Normal .....	100	12.38
Near Normal .....	163	20.15
Backward .....	233	28.80
Feeble-minded .....	214	26.45**
Subnormal .....	99	12.24

\*In this connection, it is interesting to note the classification adopted by the Psychological investigators of the New Jersey State Home for Girls, Trenton, N. J. Previous to their work for 1913 and 1914 they had used a three-fold classification. I-Normal, II-Borderline, III-Defective. In their annual report for the period ending October 31, 1914, they, however, enlarge this classification by subdividing their borderline cases into Backward "those just above the line, practically Normal" and Subnormal "those just below the line."

\*\*The number of feeble-minded here tabulated includes not only the 21.3 per cent of the boys at Lansing and 34 per cent of the girls at Adrian whom the Binet method alone showed to be feeble-minded, but also an additional 5.1 per cent of the boys at Lansing and 16.7 per cent of the girls at Adrian who were, according to the investigator's opinion, definitely feeble-minded.



## ADRIAN.

Normal .....	31	8.03
Near Normal .....	31	8.03
Backward .....	46	11.91
Feeble-minded .....	195	50.52*
Subnormal .....	83	21.50

In the following discussions and in the tabulation of all figures in the statistical Appendix, unless specifically stated, when the Normal Group is mentioned, reference is made to all the individuals in the Normal, Near Normal and Backward classes; when the Feeble-minded Group is spoken of, reference is made to all individuals in the Feeble-minded and Subnormal classes.

At Lansing there were 496 or 61 per cent of the inmates in the Normal Group while there were 313 or 39 per cent in the Feeble-minded Group.

In the Normal Group at Adrian there were 108 or 27.98 per cent of the inmates and in the Feeble-minded Group 278 or 72.02 per cent.

#### Grade and Age of Leaving School.

As bearing upon our grouping of individuals into the two large classes of Normal and Feeble-minded, there are two related groups of facts which are of interest. These facts are the age at which the inmates of the two industrial schools left the public schools and the school grade to which they had attained at that time.

While the average age at which the Lansing Industrial School boys in the Normal Group left school was 12.44 years and that of the Feeble-minded boys 12.97 years—the average grade reached by the former was the fifth (5.01) while that reached by the latter was not quite the fourth (3.73). Thus while the boys in the Normal Group averaged one-half year younger when they left school than did those in the Feeble-minded Group, they were at that time over a grade—that is, over one year's work—in advance of the boys in the Feeble-minded Group. (See Table 21.)

Practically the same relation of age of leaving school and of grade attained is shown by the figures obtained from the two groups of girls at Adrian. The girls of the Normal Group left school at an average age of 13.55, a slightly higher age than did the girls of the Feeble-minded Group, who left at an average age of 13.39. Yet the former had attained a much higher school grade (6.71) than had the latter (5.14). The girls of the Normal Group, with the advantage of being only one-fifth of a year older when they left school than were the girls of the Feeble-minded Group, had advanced one and one-half years farther in their school work.

It is to be regretted that facts could not be obtained regarding the age at which the children started their school work, thus making it possible to ascertain the number of years each group has been in school attendance. There are, however, two considerations that would lead one to suppose that in all probability, both the children in the Normal and in the Feeble-minded Group were in school attendance approximately the same number of years. We have the fact that the difference in the mentality of the members of the two groups had no appreciable influence

\*See foot note on preceding page.



upon the age at which they left school. Then, there is also the fact that there are practically no low grade cases in the Feeble-minded Group which we are considering. It is probable that it is only the low grade cases of feeble-mindedness, the very defective, that would in their early years be so retarded in development as to be kept from starting school at the usual age.

Briefly summarized then, the facts for Lansing and Adrian agree in showing that the members placed in our so-called Normal Group and those in our so-called Feeble-minded Group left school at practically the same age and yet the former were over a year further advanced in their school work than were the latter. This relation of facts would seem to corroborate the groupings of individuals as made by the investigators.

There is one group of facts that might at first glance seem to vitiate the above conclusion. It was found that the school attendance of the individuals in the Normal Group was more regular than was that of the individuals in the Feeble-minded Group. At Lansing 20 per cent of the Normal Group attended school regularly, 26 per cent with slight irregularity, and 51 per cent very irregularly. In the case of the Feeble-minded Group only 8 per cent attended regularly and 16.29 per cent with slight irregularity, while 68.35 per cent attended very irregularly. Practically the same difference existed between the attendance of the two groups at Adrian. Of the Normal Group 47 per cent were regular in attendance, 35 per cent slightly irregular and 18 per cent were very irregular while of the Feeble-minded Group, 32 per cent were regular in attendance, 31 per cent slightly irregular and 37 per cent very irregular. (See Table 21.)

While it might be thought at first that these figures, showing greater irregularity of attendance on the part of the individual in the Feeble-minded Group, would invalidate our previous conclusions by offering the true explanation of their poor showing in school advancement, yet before accepting this conclusion, there is another aspect of the situation to be considered. It must be remembered that the public schools, conducted as they are for normal children, fail to enlist the interest of the child whose mentality is below that of his fellows and that this makes toward irregularity in attendance. In fact, we are of the opinion that the very irregularity of the attendance of the members placed in our Feeble-minded Group is further evidence of their defectiveness.

In considering the various facts that are related to either the delinquencies, or the mentality of the two groups, we feel that attention should be called to the method in which these facts were obtained. The investigator interviewed each individual, studied the commitment papers, the institutional records, and gained all possible information from the teachers of the institution. The facts which we are about to quote are based upon this information. It is to be regretted that field work, including visits to the neighborhood and home of each individual could not have been made. This would have given an additional and more concise picture of the exact environmental soil from which our delinquents sprang. In many cases it undoubtedly would have clearly depicted the close inter-relation existing between environmental factors and a deficient hereditary mental endowment as causes of delinquencies. However, the limitations of time made such an intensive study impossible. But even without this field work, we feel that our results are sufficiently

exact and sufficiently large to indicate relations that are of enough importance to deserve consideration by those interested in the problem of feeble-mindedness and especially this problem in relation to juvenile delinquency.

### Physical Factors.

Among other factors which are of prime importance in any study of either the delinquent or the defective class is the physical condition of its members. Certain physical defects, such as poor teeth, poorly placed teeth, anomalies of the dental arch, enlarged tonsils and adenoids, under-nourished bodies, defective vision or hearing are often, in the growing child, influential factors in causing even extreme backwardness in mental development as well as by the very fact of lessening physical and nervous resistance, making the child more susceptible to bad environmental influences. These very conditions again make it impossible for the individual to keep up with the school work. Consequently, he becomes discouraged, plays truant, gets into bad gangs and forms bad habits. The whole is a vicious chain, never ending, but each link reinforcing each other link.

Other physical anomalies and even some of those defects we have already mentioned, are often the physical concomitants of congenital mental defectiveness. At each of the schools there was a considerable proportion of physical defects. (See Table 22.)

Of the total 809 boys examined 10 per cent (78) had irregular teeth; four per cent (34) widely spaced teeth; three per cent (22) first teeth (indicating retarded physical development); and eight per cent (62) poor teeth. Of the total number there were seven per cent (59) whose teeth were in really good condition.

Tonsils and adenoids were or had been present in a large per cent of the cases. There were five per cent (38) of the individuals who had had either adenoids or tonsils removed while, as accurately as could be observed by one without special medical training, 35 per cent (286) had at that time either adenoids or enlarged tonsils. There was also an additional five per cent (39) of the cases in which the presence of adenoids was suspected. Of all the cases examined 10.5 per cent were mouth breathers. Defective palatal arches were noted in five per cent of the cases.

While the number of individuals having markedly defective hearing or vision was not excessive, it is large enough to be significant. There were 37 or five per cent of the cases whose hearing was defective and 108 or 13 per cent with defects of the eyes. Of the 809 cases, 10 per cent (79) had defects of vision; two per cent (14) wore glasses; two per cent (15) showed strabismus.

General conditions of physical underdevelopment of various grades were also noted in a considerable per cent of the cases. Fifteen per cent (118) were slightly undersized; 16 per cent (128) were decidedly undersized; while 11 per cent (91) more were weak and anemic. Of equal interest is the fact that of the total 809 only 13 per cent (104) were notably well formed and proportioned.

There were a few cases of each of several definite physical defects and diseases. The most worthy of note are the eight cases of venereal dis-

ease, 15 of thyroid enlargement, four hernia, seven probable tuberculosis, one hemiplegia, 15 cripples.

There were a number of physical anomalies that are usually associated with hereditary degeneracy. Of these the more worthy of note are defectiveness in the form of ear, which was found in about 50 per cent of the cases; marked asymmetry of face or body 12 per cent; markedly unusual head form six per cent; speech defect two per cent.

A similar examination of the girls at Adrian resulted in the following body of facts:

There were nine per cent (34) who had irregular teeth; nine per cent (34) teeth noticeably far apart; four per cent (15) first teeth; seven per cent (28) decidedly poor teeth. Of these whose teeth were in good condition there were 10 per cent (39).

Nineteen per cent (74) of the girls had either adenoids or enlarged tonsils. Only about three per cent had had tonsils or adenoids removed. Three per cent of all the cases were mouth breathers and 16 per cent had defective palatal arches.

Only two per cent (9) of the girls had noticeably defective hearing. In at least 17 per cent (64) of the cases there was a defect of the eye. One per cent (4) wore glasses, 11 per cent (43) of the others had defective vision, and four per cent (17) had a strabismus.

There were of the 386, 13 per cent (50) who were slightly undersized, eight per cent (30) markedly undersized, and five per cent (19) who were poorly nourished and anemic.

The other definite physical defects and diseases to be noted are 55 cases (14%) of gonorrhoea\* and four cases (1%) of syphilis; 26 per cent (101) cases of thyroid enlargement; six cases of chorea.

Of the physical stigmata of degeneracy, there were found to be the following: Defectiveness of ear form in about 55 per cent of the cases; definite facial or bodily asymmetry in 17 per cent; peculiarity of head shape seven per cent; marked physical abnormalities eight per cent.

So far, we have been considering the totals for each industrial school. These are the facts which are most to be relied upon. While the percentages concerning each of the facts with which we have just been dealing are practically the same for both the Normal and the Feeble-minded, yet in relation to some of the facts there are rather striking differences between these two groups.

Among the boys of the Normal Group, for instance, seven per cent have markedly irregular teeth, while of the Feeble-minded Group, this per cent is nearly double (13%). We find that only seven per cent of the Normal Group are mouth breathers as contrasted with 16 per cent of the Feeble-minded Group. Among the girls, 10 per cent of the Feeble-minded Group had their teeth abnormally far apart, while this was true of only six per cent of the Normals. Of the Normal Group 18 per cent had good teeth as contrasted with seven per cent of the Feeble-minded Group.

Quite marked contrasts are also shown in the matter of defectively formed ears. Among the boys such defects were found in about 46 per cent of the Normals and in about 55 per cent of the Feeble-minded Group. Nearly the same difference existed between the two groups of girls,

\* These facts at Adrian were obtained from the reports of the physician at the Institution.

where there were about 47 per cent of the Normals as opposed to 57 per cent of the Feeble-minded with this sort of defectiveness.

There were 39 per cent of the Normal and 46 per cent of the Feeble-minded boys who were undersized and anemic. While of the girls, there were 22 per cent of the Normal and 27 per cent of the Feeble-minded. Ten per cent of the Normal and 16 per cent of the Feeble-minded boys showed marked abnormalities of the face or body. Of the girls, nine per cent Normal as contrasted with 20 per cent feeble-minded had similar asymmetries. There was practically no difference in the distribution of the markedly peculiar head shapes among the two groups of girls. But with the boys there were three per cent of the Normals who showed this peculiarity and 10 per cent of the Feeble-minded. Of the six cases of chorea, existing in the group of girls, five were in the Feeble-minded Group. Doubtless these individuals were cases of mental degeneration, resulting from the chorea, although it is barely possible that they were cases of congenital defectiveness.

In reflecting upon these differences between the individuals of the Normal and the Feeble-minded Groups, one is struck by the fact that they are all differences in things which are generally considered as physical stigmata of degeneracy and in all cases the Feeble-minded have markedly higher percentages than have the Normal.

#### Occupations.

Although the average age at which the delinquents were committed to the industrial school was relatively low, 13.2 years for the boys and 14.5 years for the girls, yet the boys and girls both had had in a large number of cases more or less varied experiences at wage earning. Owing to the difference in the employments open to the boys and girls, the information furnished by the groups is not identical. Thus while it is feasible to ascertain the wage of the girl who has worked by the week, it is not easy for a boy who has been shining shoes or selling papers to state his average earnings per week. But when it comes to the kind of employment in which they have been engaged facts may be obtained from each. The facts concerning the occupations of the boys will be discussed first. (See Table 23.)

The thing which most boys had done was "odd jobs." There were 57 per cent (460) of the 809 who had at some time or other earned money in this way. Of course, that a large number of boys at this age should have done this sort of work is to be expected. Yet, even if it is to be expected, it cannot but attract attention when considered in relation to the relatively small percentages of the boys who had done other definite and well defined work. Aside from 41 per cent who had either sold or delivered papers, a work not requiring that continuity of energy and attention which is demanded in a regular employment, and the 30 per cent who had worked on farms, there were only small percentages who had done other forms of work. The rather high percentage who had done farm work is somewhat misleading in that it includes a good many foreign boys who lived in the city and simply went out and worked during the summer. The more definite kinds of work that had been done were delivering seven per cent, clerking four per cent, messenger service four per cent, office work two per cent and factory work 15 per cent. Briefly stated, our occupational facts concerning the kind of em-

ployment show that although many of the boys had worked, few had any *steady, definite* work. Of all these boys who had worked, 356 or 44 per cent had been either one or more of the following: Newsboy, messenger boy, bootblack or an employe in show places. Sixty, or seven per cent had been in two of these employments. These trades bringing the boy into contact with the life of the street are often sources of bad suggestion. (See Table 23.)

There are a few kinds of employment in which there is a considerable difference in the extent to which the Feebleminded and Normal were found. Thirty-five per cent only of the Feebleminded had been newsboys as contrasted with 45 per cent of the Normal. While, as was pointed out previously, to be a newsboy does not require steady application, yet it does require an unusual amount of alertness, at least among those selling on the streets of the large cities. In proportion to the actual numbers of the two groups, there were nearly twice as many among the Normal (9%) as among the Feebleminded (5%), who had been delivery boys; and also about twice as many Normals (5%) as Feebleminded (2%), who had been clerks. The fact that 16 per cent more of the Normal than of the Feebleminded Group had done "odd jobs" is probably accounted for by the other fact that the number in the Normal Group (73%), who had had more than one occupation was much greater than it was in the Feebleminded Group (53%). Although the average number of occupations was only slightly higher for the Normal (2.5) than for the Feebleminded (2) yet over a third more of the Normal in proportion to the actual numbers within the two groups had done three things, and twice as many had done four, while nearly twice as many had done five. This fact, together with the small percentages, as already noted, who had done definite steady work, would seem to indicate, at least, among the Normals, a tendency to instability.

About one-half of the girls at Adrian had either done housework (40%) or had been nurse girls (8%), or had washed dishes (6%). The one other kind of work that had been done most frequently by these girls was factory work (18%). Eleven per cent had been waitresses and only a very few had done other things. When we look at the question of the different number of places worked in (See Table 24), we see an apparent reversing of the conditions found among the boys. Only 43 per cent of the Normal Group as contrasted with 47 per cent of the Feebleminded Group had worked in more than one place. Stated in terms of the average number of places worked in, the figure for the Normal Group is 2.8 places and that for the Feebleminded Group is 3.3 places. This apparent contradiction is probably due to the fact that the occupations of the boys were so largely in positions without supervision, where inefficiency would not lead to discharge, while at Adrian there were none of this class. Also the fact that so many (57%) of the boys, while only a few (5%) of the girls did "odd jobs," would help to make this difference in the two cases. Any number of discharges from "odd job" positions would not have been recorded as change of position.

Closely related to the number of places in which the girls had worked, are the facts in regard to the length of time during which they held their position. Leaving out of consideration ten individuals who had worked for room and board and 13 others who had just worked during vacations, there was a total of 248 girls about whom information was ob-

tained on this point. Nearly half of this number (45%) had held their position for less than five weeks, while only eight per cent had held them over 30 weeks. Substantiating the fact that the Feeble-minded girls had held more positions than the Normal girls is the fact that they had remained in their first positions for a shorter period of weeks.

Thus while it was found that 85 per cent of the Feeble-minded as contrasted with 75 per cent of the Normal Group had stayed in the same place less than 20 weeks, when the period of service lengthens to from 20 to 29 weeks there are only eight per cent of the Feeble-minded Group as compared with 13 per cent of the Normal who had held their positions. Only seven per cent Feeble-minded as contrasted with 12 per cent Normal had worked over 30 weeks. The average length of time during which those in the Normal Group remained in their positions was 12.3 weeks while the average for the Feeble-minded Group was 9.7 weeks.

Facts were learned concerning the lowest wage of 112 girls. For nine of these the lowest wage was under \$1.00 per week, while for only three was it over \$6.00. The largest per cent, (21%) or 23 cases received as their lowest wage from \$2.50 to \$3.00 per week. The average lowest wage was, roughly, \$2.50.

In the cases of 173 girls, facts were learned concerning the highest wage which they received. The highest wage of three girls was less than \$1.00 per week while for only seven was it over \$9.00 and one of these seven was a professional prostitute. The largest per cent of the girls (18%) or 32 cases received from \$3.00 to \$4.00. The approximate average highest wage received by these 173 girls was \$4.50.

Evidence of the inferior capacity of the girls in the Feeble-minded Group is found by comparing the average lowest and the highest wages of these girls with those of the Normal girls. The approximate average lowest wage of the girls in the Normal Group was \$3.20, while that of the Feeble-minded Group was \$2.40. The approximate average highest wage for the girls in the Normal Group was \$5.23 while that for those in the Feeble-minded Group was \$4.07.

### **Delinquent Record.**

Only the more striking points in the delinquent records of the inmates of the two schools will be touched upon here. Those who are interested in this particular phase of the subject will find the detailed results of the investigation in Table 25 of the Appendix.

It is interesting to note that of the boys now at Lansing less than one-fourth (23%) as opposed to one-half (47%) of the girls now at Adrian were sent there upon their first offense.\* The other principal treatments meted out for first offenses were probation—boys 32 per cent, girls 10 per cent; cases dismissed—boys 20 per cent, girls nine per cent. It will be noticed that the treatment of the girls upon their first offense was much more severe than was that of the boys.

A possible explanation of this may be found in the fact that in the eyes of the law the sex offenses of the girls (32% being committed for these) are considered more serious than the offenses of larceny (44%) and truancy (31%) for which the boys were largely brought into court.

\*Whenever "first offense" is mentioned, the first offense which brought the subject into contact with the law is meant.



The sex offenses of the girls consisted largely of illicit intercourse and the boy in the case was seldom, if ever, brought before the court. As a matter of fact 37 per cent of the 229 older boys at Lansing, about whom facts were gained, as against 68 per cent of the total girls at Adrian had had illicit intercourse. So although the double standard of morality accounts for the greater number of girls being brought before the court for sex offenses, it is no doubt the character of this offense which explains the fact of the girls receiving more serious treatment for their first offense.

This difference between the character of the offenses committed by the boys and girls probably also explains why there are so many more boys with a large number of delinquencies reported against them. Thirty-three per cent of the boys had been delinquent twice, 21 per cent three times, 10 per cent four times and about eight per cent over four times. Only 26 per cent of the girls had been delinquent twice, seven per cent three times, two per cent four times and about three per cent more than four times. Of course, a girl might have committed any number of sexual offenses and yet have been discovered and brought into court only once, while a boy more frequently breaking into freight cars, committing petty larceny, and playing truant would be caught and brought before the authorities much more frequently.

The causes for which the boys were actually committed to Lansing correspond very closely to the causes for which they were first brought before the authorities. There are still nearly three-fourths in which the cause is either larceny (53%) or truancy (17%), although it will be seen that the proportion between the two offenses has varied, giving larceny a much more marked preponderance. With the girls, also, there is practically no difference between the character of their first offenses and the character of those offenses which caused their first commitment.

The one other aspect of the delinquent histories of the boys and the girls that is of especial interest in this connection is that dealing with the total number of institutions in which they had been resident subsequent to their first offense.\* (See Table 26.) Of the total 809 boys, one-fourth had been in one or more institutions, either correctionary or charitable, 22 per cent had been in one or more correctionary institutions,\*\* (15% in one and 8% in more than one), and four per cent in one or more non-correctionary institutions.

Nearly as high percentages are found among the girls which is particularly striking when it is recalled that nearly twice as many girls as boys were sent directly to the industrial school. There were 24 per cent of the girls who had been resident in one or more institutions, either correctionary or charitable; 18 per cent who had been in one or more correctionary institution,\*\* (15% in one and 3% in more than one), and seven who had been in one or more non-correctionary institutions.

#### Habits.

There is perhaps no more striking group of facts in all the material which was obtained concerning the individual histories of the juvenile delinquents than that recording their habits, and especially their sex habits. (See Table 27.)

\*In giving these numbers, the present residence at the Industrial School is not considered.

\*\*Including Detention Home.

For the girls there were two ways in which the material concerning sex habits was obtained. The commitment papers furnished evidence and the girls themselves admitted much to the investigators. Of the 386 girls, 151 or 39 per cent were committed for sex offenses, while 27 or seven per cent more were committed for sex offenses together with other offenses, especially truancy and larceny. This means that of all the girls committed there were 46 per cent in which the sex offenses were the sole or partial cause for their commitment.

From the statements of the girls themselves, it was learned that 263 or 68 per cent of the 386 had had sexual intercourse. Thirty-eight per cent of the total number of girls had had intercourse with from one to three different individuals, and 20 per cent with more than three individuals.

The various facts which we were able to obtain tended to show that the girls in the Feeble-minded Group were more sexually irresponsible than were those of the Normal Group. Sexual offenses were the partial or sole causes for the commitment of 48 per cent of the girls in the Feeble-minded Group as contrasted with 42 per cent of the girls in the Normal Group. More of the Normal Group (41%) than of the Feeble-minded Group (38%) had had intercourse with from one to three different individuals. However, when it comes to the percentages of those who had had intercourse with more than three individuals we find that there were 21 per cent of the girls of the Feeble-minded Group and 16 per cent of those of the Normal Group. Taken altogether, 71 per cent of the Feeble-minded Group had had illicit intercourse as compared with 63 per cent of the Normal Group. The contrast between the numbers of the two groups is particularly marked in relation to the numbers who were guilty of incest. There were six of the Normal girls as opposed to 31 of the Feeble-minded who were guilty of this form of sexual irregularity.

No adequate data was obtained concerning the extent to which the girls smoked or used drugs, nor the extent to which they practiced self-abuse. The facts regarding the use of alcohol can be very briefly stated. Of the 386, there were 17 per cent (64) who had drunk.

The question of sex habits as it was studied among the boy delinquents was quite a different problem than was the same question as studied among the girl delinquents. In only a very few cases did sexual offenses appear as the cause of commitment. There were two boys committed for sodomy, two for rape, and four for taking improper liberties with a female child. When it is remembered that there were 809 boys, whose commitment records were studied, it will be seen how relatively unimportant sex offenses were as the direct cause of commitment. However, even though sex habits did not appear as direct factors in the commitment of the boys, the facts obtained would indicate that they had an unquestionable influence upon their lives.

The entire study at Lansing was undertaken by two people, a man investigator and a woman investigator. It was felt that it would be difficult for a woman to successfully obtain information concerning the sex habits of boys of this age. Therefore, no attempt was made to ascertain such facts concerning the boys with whom the woman investigator worked. Consequently all the facts obtained on this question were from the group of boys with whom the man investigator worked. This group



included 229 boys, most of whom were of the older class of boys (only 15 were under 13 years of age). These, therefore, as a rule, were those who had had a more extensive delinquent and sexual experience. The investigation was conducted by one experienced in dealing with boys.

The sex habits of the boys were masturbation, sodomy and normal intercourse with the opposite sex. Of the 229 boys in the group about which sex facts were obtained, 25% (59) had practiced sodomy. There were two-thirds (153) who had indulged in the practice of masturbation. Eighty-five or 37 per cent of these boys had had illicit intercourse. Of these 85 there were 11 who had been in houses of prostitution, four who had had intercourse with their sisters, while three had had intercourse with cousins. Seven per cent (17) of the boys had practiced both sodomy and masturbation and also had had sexual intercourse. There were 21.18 per cent who had practiced both sodomy and masturbation. Of the entire group, there was nearly three-fourths (163), 71 per cent, who had practiced either sodomy, masturbation, or both, while of those who had either practiced sodomy, had had intercourse with the opposite sex, or had masturbated there were 76 per cent (174).

Comparing the boys in the Normal and Feeble-minded Groups, it was found that those sex habits which were perversions of the natural expression of the sex instinct existed more largely among the members of the Feeble-minded Group than among those of the Normal Group. Thus 29 per cent (24) of the 82 boys in the Feeble-minded Group compared with 24 per cent (35) of the 147 boys in the Normal Group had practiced sodomy and 73.14 per cent (60) of the Feeble-minded Group as compared with 63 per cent (93) of the Normal Group had practiced masturbation. Even when it comes to the question of expressing the sexual instinct in the normal though illicit intercourse with the opposite sex, the Feeble-minded slightly exceeded, except in the matter of excessive intercourse, those of the Normal Group. Thus of the 147 in the Normal Group there were 36 per cent who had had intercourse, while in the Feeble-minded Group there were 39 per cent. However, 18 per cent of the Normal Group had had intercourse more than three times as opposed to 16 per cent of the Feeble-minded Group. (See Table 27.)

Data concerning the extent to which the boys used tobacco and alcohol was obtained by both investigators. Therefore, the percentages given in relation to these habits apply to the entire group of 809 boys. There were 581 or 71 per cent of these who had smoked. Of this number 113 had smoked excessively. Two hundred seventy-seven or 34 per cent of the boys chewed; 30 of these had chewed since they had been in the institution. Of the 809 boys, 273 or 34 per cent had used alcoholic beverages. There were 105 or 13 per cent who had been drunk one or more times.

There was practically no difference in the proportion of the Normal and the Feeble-minded who smoked, although the practice of chewing was more prevalent among the boys of the Feeble-minded Group, there being 39 per cent of the group who did it, as opposed to 31 per cent of those in the Normal Group. A very interesting contrast is shown in the percentages of the two groups who have chewed since they had been in the institution. There were five per cent of the Normal Group boys who had been successful enough to escape the vigilance of the authorities and obtain tobacco, while there were only two per cent of the boys in the Feeble-minded Group who had been equally successful. There was very

little difference also in the extent to which the two groups had used alcohol.

#### Other Facts.

There are a few more facts to be considered in relation to the general conditions, which may have had a bearing upon the delinquencies of the children in the two industrial schools.

There were relatively few of either the boys (12%, 92 cases) or of the girls (8%, 29 cases) who were born in foreign countries. Of the foreign born boys, the largest number were born in Canada (13) and Poland (33). The largest number of the foreign born girls were from Canada (22). Seventy-three per cent (593) of all the boys and 76 per cent (294) of all the girls were born in Michigan. (See Table 28.)

Even though the majority of the children themselves were native born, there was a large number of the parents who were foreign born. Of all the fathers and mothers of the boys, 42 per cent were foreign born while of all those of the girls 27 per cent were foreign born. Thirty-six per cent of the boys and 18 per cent of the girls were of foreign parentage. Twelve per cent more of the boys and 19 per cent more of the girls were of foreign or mixed parentage and 26 per cent of the boys and 30 per cent of the girls were of pure native parentage. (See Table 29.)

It is to be seen, therefore, that while the number of foreign born children in the industrial schools is relatively small, yet a large proportion of them (48% of the boys and 37% of the girls) were of foreign or partially foreign extraction. This fact may have an important bearing upon the child's development. It may oftentimes mean an inability of the parents to grasp sufficiently the new environment into which they have come, to enable them to guide their children in the problems which this environment presents to them.

The number of times a child has moved from one place to another may be doubly significant. It may be indicative of instability on the part of the parents. Very frequent moves may also mean that the child does not have a chance to adequately readapt itself to the changed environment. This is frequently a factor contributing to his delinquency. The failure of quick readjustment to the new conditions which the individual is forced to meet may cause a conflict with the law by a mere failure to understand the customs of law enforcement in the new community. Thus, a boy may move from a district where the policeman is genial and does not enforce the ordinance against riding a bicycle on the sidewalk to another district of the same city in which the policeman is surly and does enforce this ordinance.

Information concerning the number of times that the individual has moved was obtained in all but a few cases (one per cent of the girls and seven per cent of the boys). Only five per cent of the boys and three per cent of the girls had always lived in the same place, while about one-fourth of each had lived in four or five different places, and about 15 per cent more of the boys and 30 per cent more of the girls had lived in more than five places. About one-third of the boys and one-fourth of the girls had lived in only one city, while nearly two-fifths of both boys and girls had lived in two or three different cities,\* nearly one-

\*A city lived in at two or more different times was counted as two or more cities.

fifth in four or five, and about six per cent of the boys and 10 per cent of the girls in over five cities. (See Table 30.)

### Family Facts.

So far, we have been presenting data relating very directly to the history and character of the individuals themselves. We now turn to a consideration of the data that pertains to the relatives and to the family life of these same individuals. Though the data obtained is not as complete as could be wished, it is sufficiently striking to indicate important relations to the delinquencies and mentalities of the inmates in the industrial schools.

No definite attempt was made to obtain information concerning the occupations of the fathers and mothers of the Adrian girls. Such an attempt was, however, made in the work at Lansing. The most interesting thing shown by the facts concerning the occupations of the boys' fathers is the greater proportion of the fathers of the boys in the Feeble-minded Group who were doing unskilled work. (See Table 32.)

There were 221 fathers of the boys in the Feeble-minded Group about whom occupational facts were definitely enough known to classify their occupation as either skilled or unskilled. Of these 57, or only 26 per cent, were doing skilled work, while 164, or 74 per cent, were doing unskilled work. Similar occupational facts were known about 375 fathers of the boys of the Normal Group. Of these 44 per cent were doing skilled work while 56 per cent were doing unskilled work.

Of the mothers of the 809 boys, it is definitely known that at least 339 contributed to the support of the family by wage earning. Two-thirds of all the mothers who did wage earning work (or 17 per cent of all the mothers) did it at home, largely in the form of washing. There were nearly as many of all the mothers (15 per cent) who did work which took them away from the home at least a part of the time. This number consists largely of those who did general housework by the day or week. There were nearly six per cent of all the mothers who did work such as in factories, stores, or hotels, which kept them away from home all day. (See Table 33.)

Other facts were learned about the parents of both the boys and girls of the industrial schools. (See Tables 34 and 35.)

There were 20 of the parents of the Adrian girls who had been in jail, 11 in State Prison, five in the House of Correction, one in Lansing and two in Adrian. Of the total 386 fathers of these girls 47 per cent (183) were users of alcoholic beverages, 10 per cent being excessive drinkers. The extent to which the other 37 per cent drank is unknown. Six of the fathers were in State Prison for sex offenses. Forty-six of the mothers drank to some extent, nine of the mothers were prostitutes.

Of the total 386 families 14 per cent had received help from the city or county. Only nine per cent of the families of the girls in the Normal Group, as contrasted with 16 per cent of those in the Feeble-minded Group, had received such help.

One hundred six of the Lansing boys' parents had been in jail, 25 in the House of Correction, seven in State Prison and two in Adrian. There were 422, or 52 per cent, of the fathers of the 809 boys who drank, 20 per cent excessively. Fifty-seven of the mothers of the boys drank.

Of the 809 families, 131, or 16 per cent, had had help from the city or county. Twenty-two per cent of the families in the Feeble-minded Group as contrasted with 12 per cent of the families in the Normal Group.

Equally interesting with the parental facts, at least in relation to institutional records, are those concerning the fraternities of the boys and girls. In 37 instances there were two brothers, and in one instance three brothers, in Lansing at the time this study was made. From the fraternities of all the boys there were 59 others who had at some previous time been at Lansing, and 25 who had been at the Adrian Industrial Home. Forty-eight members of the fraternities of these boys had been in jail, 11 in the House of Correction and eight in State Prison; 39 had been in the State Public School at Coldwater, two in insane hospitals, and six in Lapeer. Forty-two had been in private orphan asylums.

Among the girls studied at Adrian there were eight instances of two sisters and one of three. There were 14 other sisters of the Adrian girls who had been at Adrian and 40 of their brothers who had been at the Lansing Industrial School. There were also 12 members of their fraternities who had been in State Prison. There were 34 who had been in the State Public School, 13 in private orphan asylums, three in Lapeer and two in insane hospitals.

Of the other relatives of the boys there were 40 who had been in jail, nine in State Prison, 45 in one of the industrial schools, six in Lapeer, nine in the State Public School, and 12 in hospitals for the insane. Of the other relatives of the girls, there were seven who had been in jail, eight in State Prison, 28 in one of the industrial schools, three in Lapeer, one in the State Public School and four in insane hospitals.

In this connection, it is worthy of note that both at Lansing and Adrian the children who came from the largest families were the children who were in the Feeble-minded Group. (See Table 36).

At Lansing the difference is only slight. Twenty-seven per cent of the boys of the Normal Group came from families of one to three children, 16 per cent from families of four children and 55 per cent from families of more than four children. Of the boys in the Feeble-minded Group, 24 per cent came from families of from one to three children, 16 per cent from families of four children, and 56 per cent from families of more than four children.

The figures for Adrian show a more marked difference. There were coming from families of from one to three children, 40 per cent of the girls in the Normal Group and 22 per cent of those in the Feeble-minded Group; coming from families of four children, Normal Group 16 per cent, Feeble-minded Group, 12 per cent; coming from families of more than four children, Normal Group 41 per cent; Feeble-minded Group 64 per cent.

The average number of children from which the girls of the Normal Group came was 4.6. That from which the Feeble-minded Group girls came was six. However, the boys of the Normal Group came from families with an average of 5.2 children, while those of the Feeble-minded Group came from families of only a slightly higher average number of children, 5.4.

### Civil Condition of Parents.

A very definite body of facts was obtained regarding the civil condition of the parents of the inmates of the Lansing and Adrian schools. The facts were ascertained for all the parents of the boys with the small exception of about four per cent of the cases, and for the parents of the girls in all but about seven per cent of the cases. (See Table 38.)

Of the families of the 809 boys there were only 42 per cent and of the families of the 386 girls only 26 per cent in which both the parents were living and living together. There were 233, or over a fourth, of the families from which the boys came and 150, or two-fifths, of the families from which the girls came that had been broken up by the death of one parent. Practically the same number of fathers died as of mothers. There were nearly three per cent of both the boys and the girls who had lost both parents. Sixteen per cent of the parents of the boys and eighteen per cent of the parents of the girls were either separated or divorced. Six per cent of the families from which the boys came and seven per cent of those from which the girls came had been broken up by desertion. The total number of desertions for both boys and girls was 78. Of these 78 cases, the desertion was on the part of the father in 59 instances and on the part of the mother in 19.

Definite as these facts are, no unequivocal conclusions can be drawn from most of them. Perhaps the cases in which the destruction of the family is most probably detrimental to the child is when that destruction is caused by death. In many cases, the death of the father means not only the removal of a beneficial, oftentimes even a necessary, influence to the successful rearing of the child, but also by removing a source of income means a lessened opportunity for normal development both intellectually and physically. The increased financial strain may force the mother to devote so much of her time to wage earning as to cause a neglect of the equally necessary but less coercive duties of child training. The child, even, may be forced to assume its share in the maintenance of the family and this, before its physical maturity, and at a time when it should be preparing for, rather than taking an active part in, the economic life of society. The death of the mother probably, in general, means the removal of the more efficient instrument in the care of the children. In regard to the parent who has deserted his family the presumption is that the general conditions of the family are but little different after the desertion. The deserting parent has probably never contributed much, either in good training or efficient financial support.

It should also be remembered that many of the parents who died had criminal records, used alcohol excessively or were otherwise immoral. Perhaps, then, the removal of this parent may not have been in the nature of a deprivation. Another fact tends to complicate the situation. Of all those families which were broken up by the death of either parent, nearly one-half (48%) were remarried. These remarriages may or may not have relieved the economic situations which needed relief and they may or may not have introduced desirable influences upon the children.

When we come to the consideration of the families which were broken up by separation or divorce, we are even less sure of our ground. It is quite as possible that the separation of members uncongenially mated would be better for the child than the continuation of such a relation-

ship. However, it is probably safe to assume that, in nearly all of the families in which the parents separated, at some period of the life of the child it was under the influence of a home environment lacking in the harmony of even the ordinary home. There can be no doubt that a child's character suffers under an atmosphere of family contention and discord.

Pains have been taken to suggest the impossibility of taking too much for granted in relation to the statistics regarding the immense number of cases in which the families of delinquent children had been broken up. This has been done because of the feeling that such statistics are too often quoted as expressing a condition unquestionably bad in its influence upon the child. It cannot be too strongly urged that such figures as we have given can do but little more than indicate a source of weakness in the environment of the developing child. Absolute facts could only be stated after an intimate study of the home conditions both before and after the change in the civil conditions of the parents.

## FEEBLEMINDEDNESS IN RELATION TO DEPENDENCY.

### Introduction.

The Commission attempted to make a study of all the people in the 79 County Infirmaries of the State. Two of the Commission's investigators were detailed for this purpose. Each infirmary was visited by one or both of these investigators.

The primary object of the investigation was to determine the mental status of the people in the County Infirmaries. In connection, however, with the study required for this purpose, an attempt was made to gain as much and as varied information as possible. It was hoped that by so doing some additional light might be thrown upon the problem of dependency or upon the problems connected with the insane or the defective.

Most of the data which the investigators obtained did have a direct bearing upon these problems. This data will be discussed here, in the body of the report. In the detailed tables of the Appendix will be found not only the figures upon which this discussion is based, but also those facts which had only a more indirect bearing upon the questions discussed.

While the total number of individuals taken care of in the County Infirmaries during the fiscal year ending June 30th, 1913, was over 7,000, the average number of individuals resident in the infirmaries, during this period, was only about 3,600. Even a considerable portion of this average population was a transient population. The facts obtained during the course of the investigation undertaken by this Commission do not embrace, then, the information concerning the total number of individuals resident in the infirmaries during one year. Information was only obtained concerning those individuals who happened to be resident at each infirmary at the time that the infirmary was visited by the investigator. The period during which this study at the infirmaries was

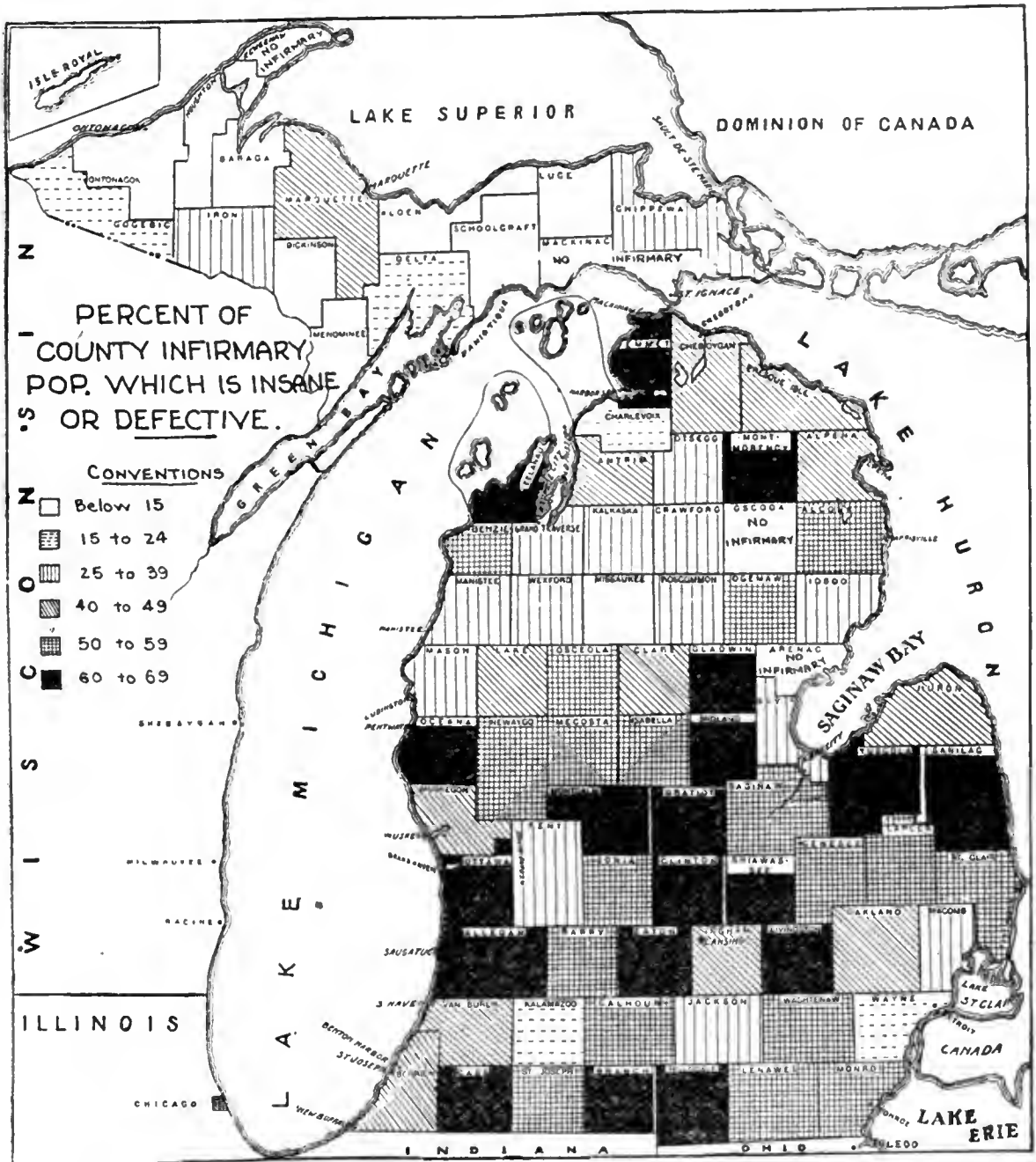


being carried on extended from July, 1913, to September, 1914. During this period 3,334 residents of the County Infirmaries were studied.

**Mental Status.**

The mental classification of these 3,334 individuals will be first considered. The problem confronting the investigator was the determina-

MAP III.



tion, after a brief interview and study, of the mental status of each individual. By far the largest number of cases could be clearly classified as Normal, Neurotic, Feeble-minded, Epileptic or Insane. There were, however, a number of cases, which though unquestionably mentally aberrated, could not be definitely classed as either feeble-minded or

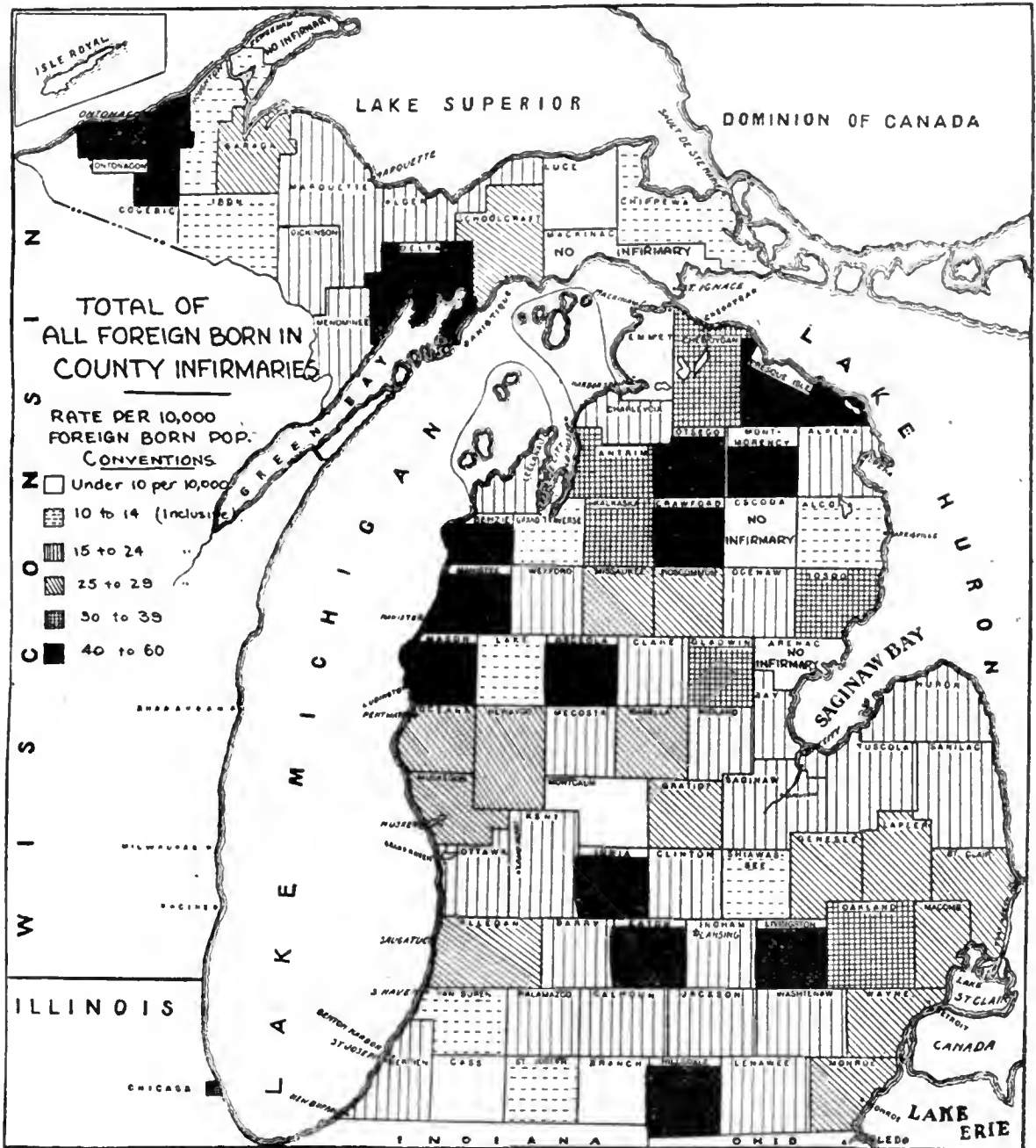




whom no interpreter could be obtained, and those individuals whose physical condition made it impossible to interview them.

On this basis of classification 58 per cent (1937) of the 3,334 County Infirmary inmates were Normal; one per cent (37) were Neurotic; 21 per cent (710) were Feeble-minded; 12 per cent (407) were Insane; two per cent (81) were of X mentality, and nearly 1.5 per cent (48) were of Questionable mentality. (See Table 38.)

MAP V



Summarized, these figures show that of the total 3,334 people in the County Infirmaries nearly two-fifths (39%) are either insane or mentally defective. In giving this percentage and throughout the body of the report, as well as in the Appendix, whenever reference is made to the

Insane and Defective Group, there are included those who were either Insane, Feeble-minded, Epileptic, or of X mentality. When the Normal Group is referred to, there are included all cases of Normal mentality and the 37 cases who were merely neurotic. The few cases in the class of Questionable mentality will not be discussed separately.

In Map III is shown for each County Infirmary the proportion of its population that is Insane and Defective, while Map IV shows the proportion that is Feeble-minded or Epileptic. (The detailed figures for each county are given in Table 39.) It will be noticed that with a very few exceptions, it is the older lower central counties that have the high-

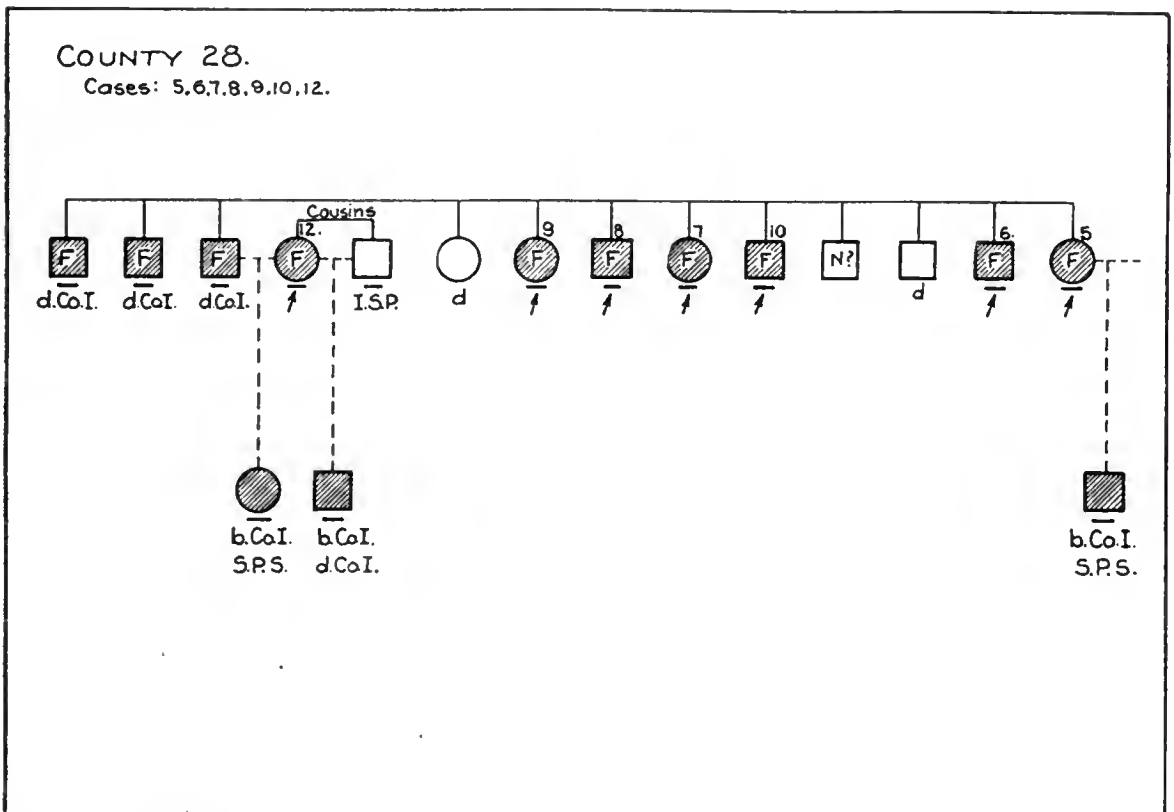


CHART 9.

This chart shows a fraternity of twelve children, nine of whom were feeble-minded and six of whom are in the County Infirmary at present (5, 6, 7, 8, 9, 10) and three of whom died in the County Infirmary. One of the brothers who died in the County Infirmary had a child born there by one of the feeble-minded inmates interviewed (12). This same inmate also had another child born at the County Infirmary by her cousin who was sent to the Ionia Reformatory. The youngest sister of this fraternity (5) also had had an illegitimate son born at the County Infirmary and sent to the State Public School. (For explanation of the symbols used in the above chart see first chart in Appendix.)

est proportion of insanity and defectiveness. Chart 9 shows the contribution of a single family to the feeble-minded population of one of these counties. By comparing these maps with Map V showing the total of all foreign born in the County Infirmaries, it can be seen that in but three cases (Montmorency, Benzie and Gladwin) have any of the more recently settled counties both a large foreign population and also a large proportion of insane and defective.

#### The Insane in County Infirmaries.

Table 40 gives the data concerning the different forms of insanity found in the County Infirmaries. Over half (56%) of the 407 cases

of insanity were senile dementia, or the insanity of old age. Corresponding with this fact, it is seen in Diagram XV that the ages of the insane range higher than do those of any other group. (See page 74.)

These cases of old age insanity present a number of different problems. Many of these individuals are only slightly disoriented or have nothing more than a very marked memory defect. Such cases are not particularly troublesome as inmates of the County Infirmary nor do they require any special care. Most senile dementia cases with only this slight degree of dementia are probably much happier living in the infirmaries of their own counties than they would be in the State Hospitals for the Insane. There are, however, other cases of senile dementia who have marked delusions, and are restless and irritable to such an extent as to make it necessary that they have constant attention. They cannot receive this care and attention in the ordinary County Infirmary, and should, where possible, be transferred to a State Hospital. The State Hospitals, however, are frequently too overcrowded to accept any cases except those who show hope of recovery or are a menace to the community.

The majority of the cases of the other forms of insanity found in the County Infirmaries are such as should most certainly be in some regular Hospital for the Insane. The manic depressive cases, at least during the periods of insanity, the paranoid cases, and those dementia praecox cases that require constant watching should all receive treatment at an Insane Hospital.

Before going into a detailed discussion of the Feeble-minded as County Infirmary problems, it seems best to take up the more general discussion of such facts as age, nativity, education, occupation, habits, physical condition, civil condition and sex in relation to the mental status of the different groups, or of the total infirmary population, or both, as the facts in each case may seem to warrant.

#### Nativity.

The proportion of foreign and of native born in the County Infirmaries of the state is of interest both in its relation to dependency and in its relation to insanity and defectiveness. Forty-three per cent of the total infirmary population was foreign born, while 53 per cent was native born. However, it is only by considering the number of foreign and native born in the infirmaries in relation to the total number of each in the total population of the state that one can determine which is contributing more largely to the dependent class. The facts are striking. For every ten thousand foreign born in the State of Michigan there are 24 foreign born who are living in the County Infirmaries of the state, while for every ten thousand of native born in the state, there are only eight native born resident in the County Infirmaries. Considering nativity in relation to mental status, we find the following facts: In the Normal Group in the County Infirmaries are found 15.75 foreign born for every ten thousand foreign born in the state and four native born for every ten thousand native born in the state. On this same ratio of number per ten thousand there are 2.8 foreign born and .9

native born in the Insane Group, and 2.6 foreign born and 2.3 native born in the Feeble-minded Group.

Briefly stated, the foreign born portion of the state's population is contributing three times as many of its members to the County Infirmaries as is the native born portion. The foreign born are contributing four times as many of their members to the Normal Group in the infirmaries as are the native born, while their contribution to the Insane Group is about three times as great as that of the native born. But the foreign born and the native born contribute about equally to the Feeble-minded Group.

Diagram XIII shows the contributions of the different countries, both to the total infirmary population and to each different group in that population. Ireland contributed more, 87 per 10,000, to the County Infirmaries, than did any other country, France with 70.21 per 10,000 second, while Scotland with 57.17 per 10,000 came third. England and Wales together contributed 35, and Germany and Prussia 28 per 10,000.

By glancing at this Diagram or referring to Tables 41 and 42 it will be seen that all of these countries with the exception of England and Wales, contribute a relatively larger proportion of their number to the Normal than to the Insane and Defective Group. This is especially true of Scotland, which contributed over four times as many to the Normal Group as it did to the Insane and Defective Group. The countries which had the largest proportion of their number in the Normal Group were Italy and Austria. The former had seven times and the latter over six times as many of its members in the Normal as in the Insane and Defective Group. While the data has not yet been tabulated in such a way as to show the alcoholic habits of the foreign born or those of the different nativities, yet the investigators felt that, at least, in the case of those born in Ireland and Scotland, the excessive use of alcohol was one of the chief causes of their dependency.

Because of its importance, it is necessary to again mention the fact that the foreign born portion of our population, despite its excessive contribution to the dependent class, has not contributed more to the Feeble-minded Group in the infirmaries than has the remainder of the population. (See Diagram XIV.) As a matter of fact, most of the Feeble-minded that we are supporting in our County Infirmaries are native born. The comparison of the foreign born of the Normal, Feeble-minded, and the total Insane and Defective is shown by Maps VI, VII and VIII. Four hundred ninety-five, or 70 per cent, of the 710 individuals in the Feeble-minded Group were born in the United States. Not only is this true, but only 38 per cent of these 710 individuals were even of foreign or mixed parentage. (See Table 43.) This means that we cannot shift to other countries the responsibility for the breeding of our defective class. We, as a state, cannot even shift much of the responsibility upon other states, for of the 495 native born Feeble-minded in the infirmaries, 324, or 65 per cent, were born in this state. Further than that, of this 324 there were 196, or 60 per cent, who were born in the county which is now supporting them at public expense.

Of all the Feeble-minded in the County Infirmaries, nearly one-half (45%) were born in Michigan. The state is breeding—we might almost say each county is breeding—its own feeble-minded. (See Table

DIAGRAM XIII.

*No. per 10,000 that the Foreign-Born County Infirmary Inmates are of the Foreign-Born of Michigan.*

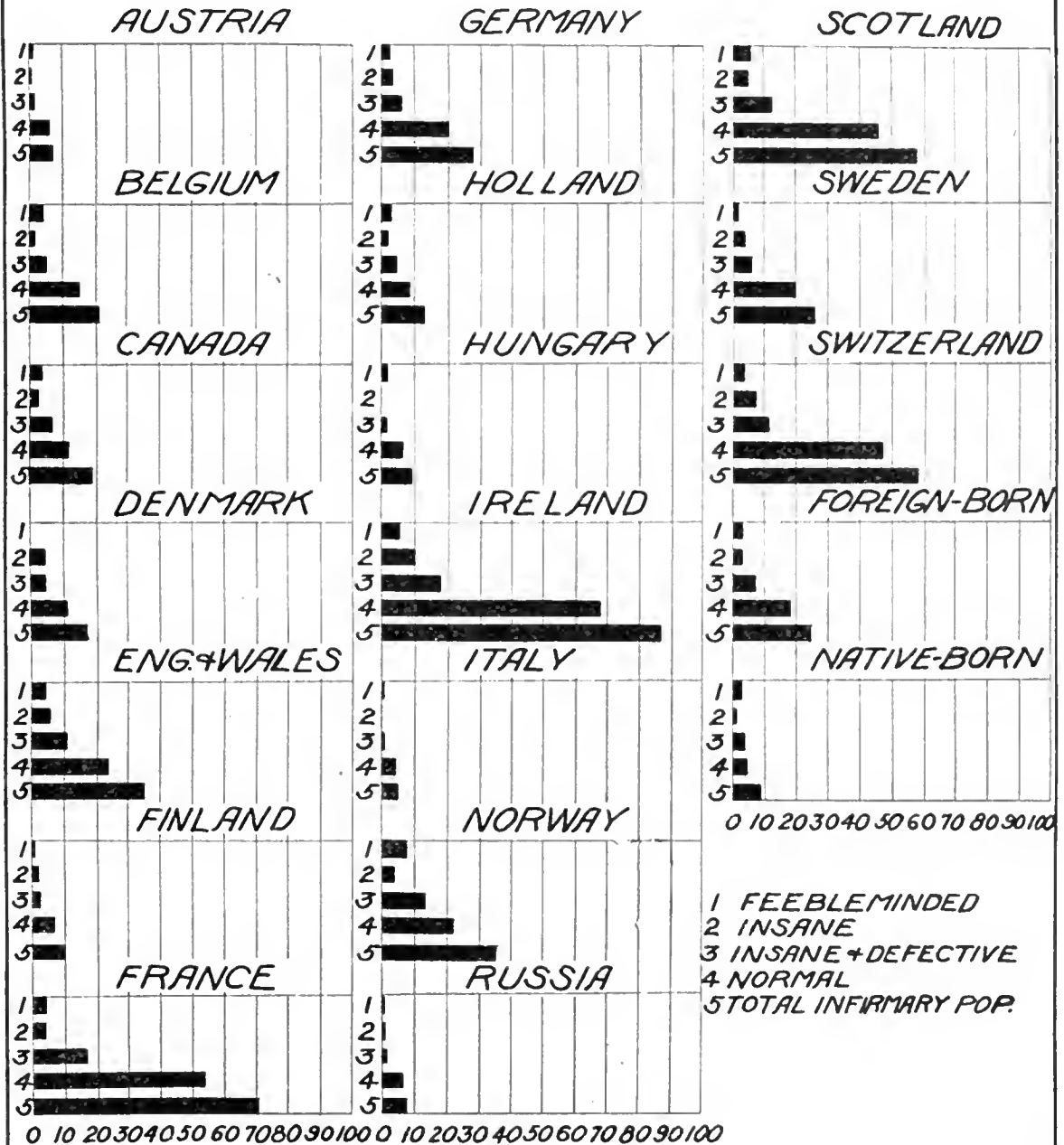
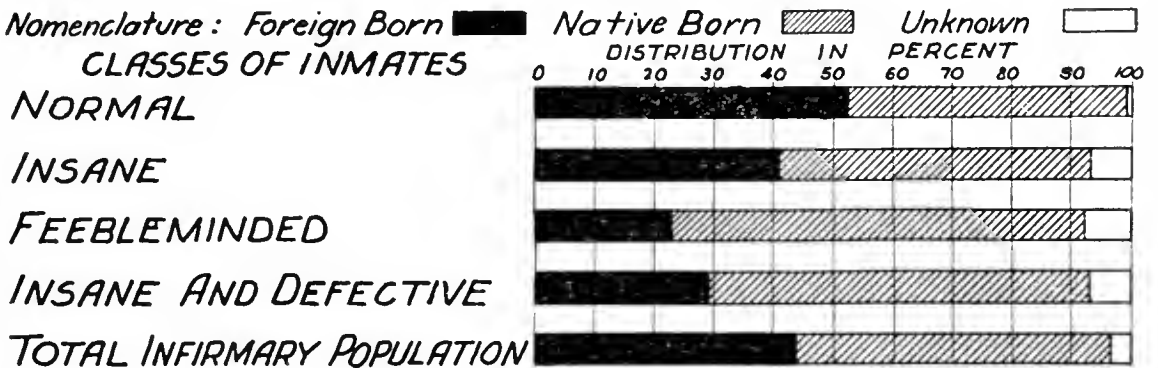


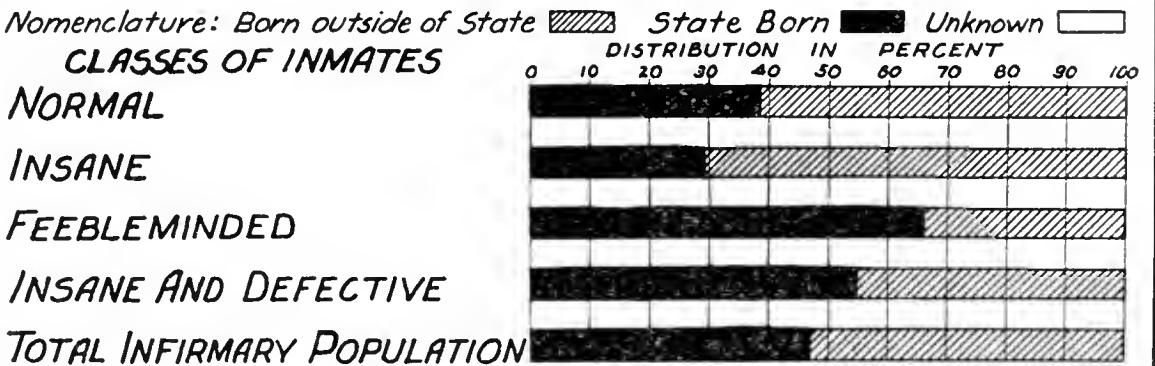
DIAGRAM XIV.

# *RATIO OF FOREIGN TO NATIVE BORN IN COUNTY INFIRMARIES, WITH DISTRIBUTION OF NATIVE BORN.*

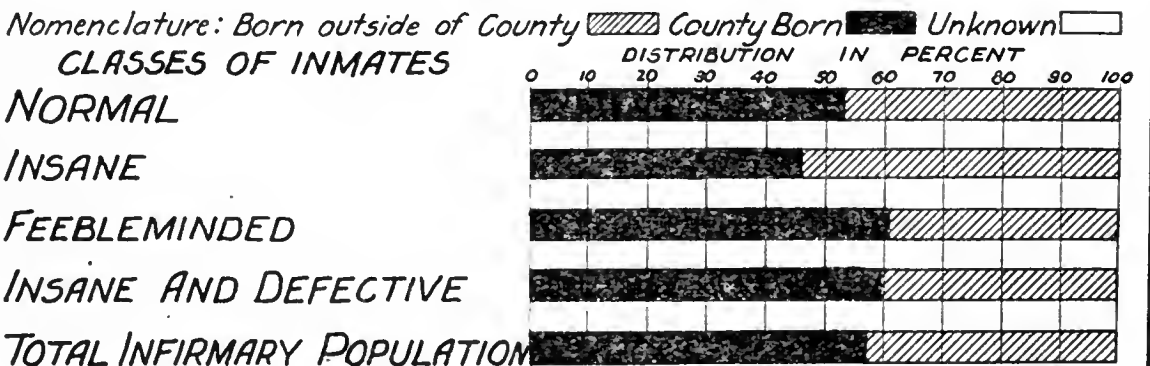
## *ALL INMATES*



## *NATIVE BORN*



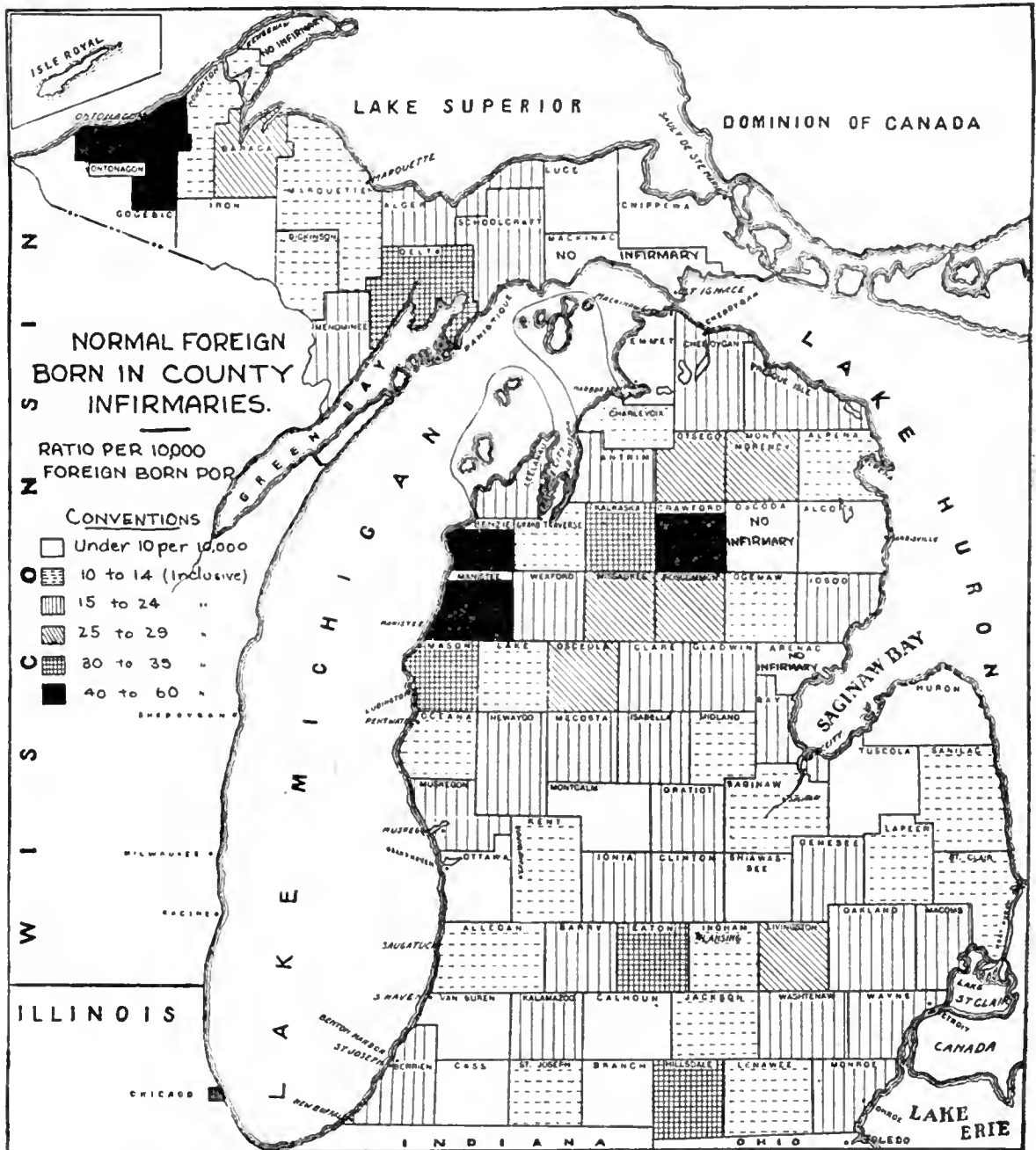
## *STATE BORN*



42.) Some of the ways in which the state is encumbering itself with this burden will be shown in a later section of this report.

In regard to the state of birth of the native born population, there is a noticeable difference in the County Infirmary population and in the general population of the state. This difference is probably due to the fact that such a large proportion of the infirmary population is old.

MAP VI.

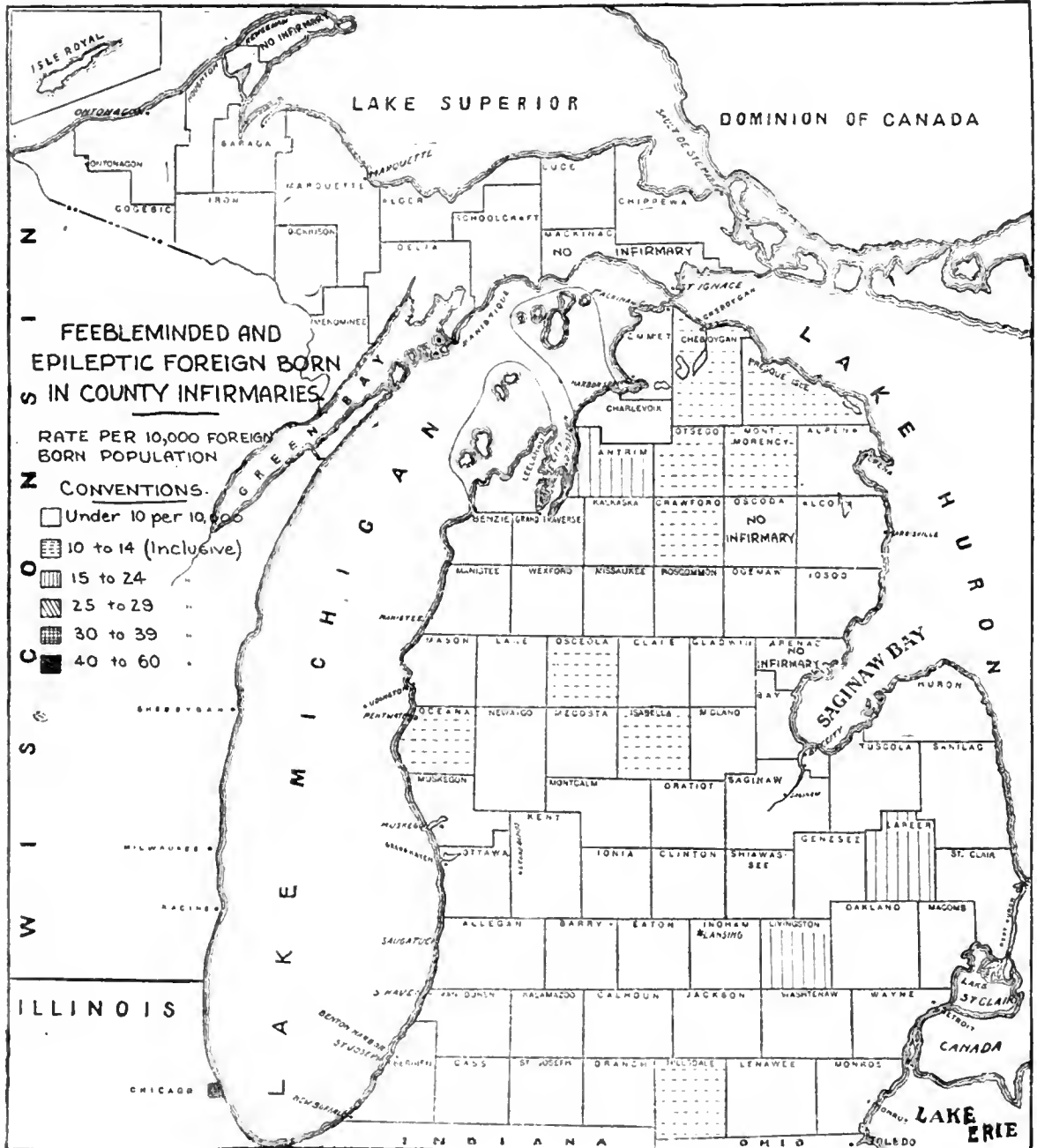


According to the last census figures 79.6 per cent of the native born living in Michigan were also born in the state. Of the native born in the County Infirmaries only 46.9 per cent were born in Michigan. The census gives 5.3 per cent of Michigan's native born as born in New York, 3.6 per cent in Ohio, 1.3 per cent in Pennsylvania, and 2.1 per



cent in Indiana. Of the native born in the County Infirmaries 24.8 per cent were born in New York, 9.4 per cent in Ohio, 4.3 per cent in Pennsylvania, and 2.6 per cent in Indiana. (See Table 41.)

MAP VII.



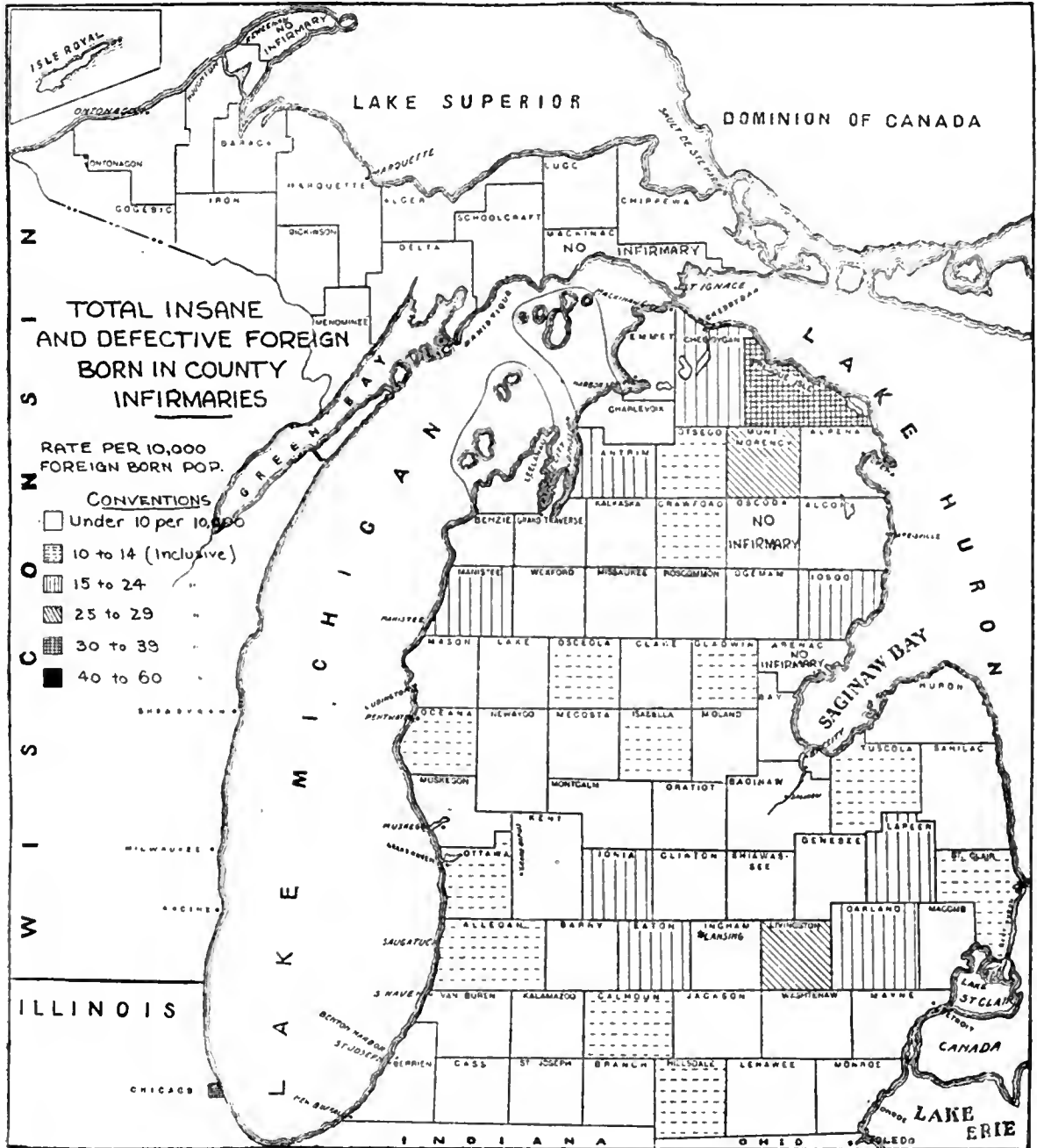
### Age.

The age of the inmates of the County Infirmaries is much higher than is that of the total population of Michigan. (See Table 44.) About 17 per cent of the state's population is from 45 to 64 years old as contrasted with 34 per cent of the County Infirmary population and only about six per cent are 65 years or over, as contrasted with 48 per cent of the County Infirmary population.



This is, of course, as would be expected. But we cannot dismiss the fact simply because it was anticipated. The age of the component parts of the Infirmary population holds more interest than do the ages of

MAP VII



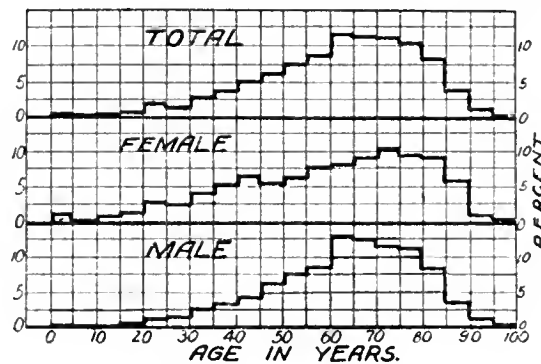
the total population. By referring to Diagram XV it will be seen that the marked preponderance of the higher ages in the infirmary population was largely due to the presence of the Insane Group. In the discussion of the insane in the infirmaries, it was seen that senile dementia was the form most frequently found. Of all the insane in the infirmaries 70 per cent were 65 or over.

The Feeble-minded Group had a greater proportion of young individuals

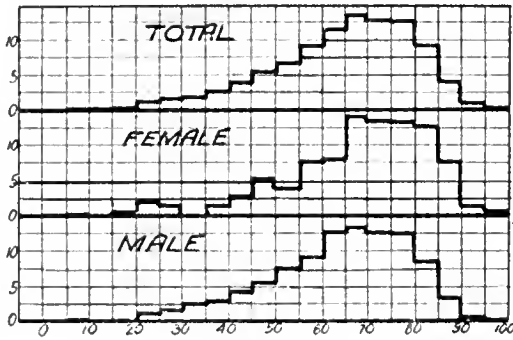
DIAGRAM XV.

# DISTRIBUTION OF AGES OF COUNTY INFIRMARY INMATES ACCORDING TO SEX AND MENTAL STATUS.

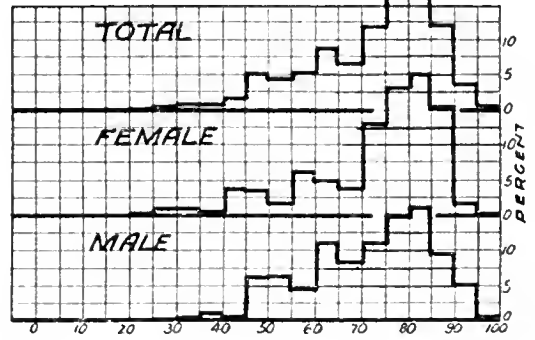
## TOTAL COUNTY INFIRMARY POPULATION



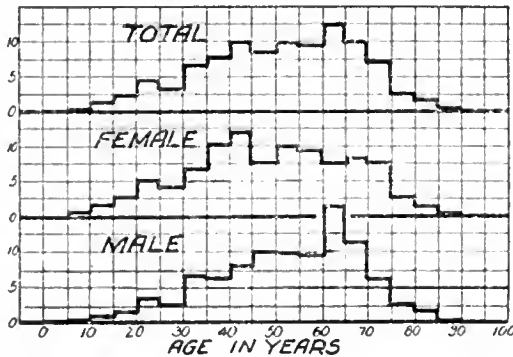
## TOTAL NORMAL GROUP



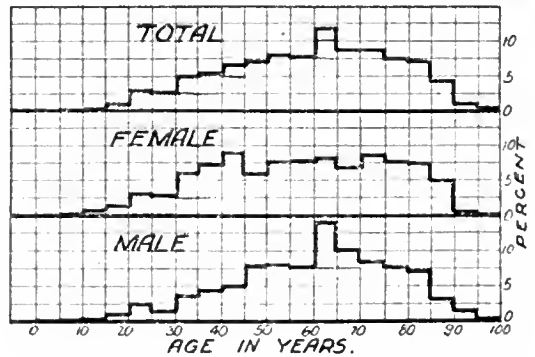
## INSANE



## FEEBLEMINDED



## TOTAL INSANE & DEFECTIVE GROUP



than did any other Group. Only 22 per cent of the Feebleminded were 65 or over. Of the Feebleminded women there were 137, or nearly 42 per cent, who were of child-bearing age (15 to 45). This is the most important fact yielded by the age statistics.

The one other age fact that deserves special comment is that relating to the number of children in the infirmaries. There were in all, but 46 individuals who were less than 15 years old. Of these, about one-half (25) were between the ages of 5 and 15. It must be remembered that in some of the counties, the County Infirmaries are the only detention homes for the temporary care of dependent children. However, it is an exceedingly undesirable environment for a child and it is felt this use of the County Infirmary should be minimized as much as possible. But besides caring for this class of children, it also has children who are not detention cases but are permanent County Infirmary residents. These cases should certainly be disposed of in another way, either by sending the child to the State Public School or some other institution appropriate to its needs. In Chart 22, Page 94, is shown the case of a girl who has always lived at the County Infirmary and should long since have been transferred to an institution for the feebleminded.

### Education.

In considering the education of the County Infirmary inmates the fact of the very large proportion of old individuals and those of foreign birth must be borne in mind. Remembering these facts, it is surprising to find that 76 per cent of the Normal Group had been to school, while even of the older Insane Group there were 53 per cent who had been. There were 32, or nearly two per cent, of the Normals who had been to college, while 143, or eight per cent, had been to high school. Of the 1,312 individuals in the Insane and Defective Group only two per cent had been to college and only 23 (about 2%) had been to high school. (See Table 45.)

Despite the fact that the numbers who had had some school training were relatively large, the proportion of illiteracy in the County Infirmary population was much larger than in the total population of the state. According to the last United States census, 3.3 per cent of the population of Michigan were illiterate.\* Of the total County Infirmary population, there were 45.4 per cent who were illiterate. This percentage of illiteracy is unduly high as it includes the data concerning the Feebleminded, who would, of course, be very largely illiterate (71.2%). But the percentage of illiteracy in the Insane is higher (84.5%), while even 29.4 per cent of the Normal Group are illiterate.

As indicated before, the fact that the foreign born make up a slightly larger portion of the infirmary population than do the native born, would lead us to expect a slightly higher percentage of illiteracy in the County Infirmary population, as the illiteracy among the foreign born white in Michigan is nearly nine times as great as it is among the native white (9.3% and 1.1%). But this fact, together with the other fact that there is a greater percentage of illiteracy in the older element of the population probably does not account entirely for the fact that

\*Unable to write. These figures refer to all over 10 years of age. Only .3 of one per cent of the County Infirmary population was below 10, so need not be considered separately.

there is a higher percentage of illiteracy in the County Infirmary population than in the total population of the state.

We may conclude, therefore, that, on the whole, the dependent class found in our County Infirmarys are less literate than are the mass of our population.

#### Occupation.

In harmony with the facts concerning the illiteracy of the people in the infirmaries are the facts relating to the occupations of the men. There were 17 per cent of all the men in the infirmaries, 44 per cent of the 382 Feeble-minded men and only eight per cent of the 1,698 Normal men, who had either had no occupation or whose occupation was unknown. There were only about one-fourth (28.7%) of the Normal Group men who had a trade, as contrasted with 19.3 per cent of the Insane and 6.3 per cent of the Feeble-minded. Of the Normals there were .7 of a per cent and of the Insane 1.6 per cent who were professional men. And there were only 2.2 per cent of the Normals and 2.4 per cent of the Insane whose occupation fell in the commercial class, such as merchant, stenographer, etcetera. (See Table 46.)

Thus it will be seen that a very small proportion either of the Normal or those who had once been Normal had had an occupation requiring any degree of skill.

#### Habits—Institutional History.

There was such a large proportion (72%) of all the men in the County Infirmarys who had drunk that one cannot but feel that this habit was at least a contributing factor in their dependence. This seems especially true in considering the fact that 37 per cent were excessive drinkers. Over eight per cent were non-drinkers, while no data was obtained concerning 12 per cent. A larger per cent of the Normals (45%) than of either the Insane (21%) or of the Feeble-minded (18%) drank to excess. (See Table 47.)

Since there is such a large per cent (84%) of the Normal Group men who drank, it is worth while indicating the extent to which they drank. There were 12 per cent of the 1,698 men in the Normal Group who drank, but the extent was unknown; 13 per cent drank occasionally in moderation; 14 per cent drank steadily in moderation; nine per cent drank occasionally to excess; eight per cent steadily in moderation, but with an occasional excess; 18 per cent steadily to excess; 10 per cent periodically to excess.

Of all the men interviewed there were 11 who were at the time suffering from delirium tremens, while there were 25 others who had previously had them. Of the 36 cases who had or had had delirium tremens, 33 were in the Normal Group.

Of all the women in the County Infirmarys, there were only 27 individuals who had drunk. Of these 27, eight had drunk excessively.

As far as could be ascertained there were only 41 individuals, 29 men and 12 women, who were addicted to the use of drugs. Eight other individuals had formerly had drug habits.

The number of arrests and the data relative to institutional residences probably is more or less closely connected with the habits of the individuals concerned. There were only small percentages of the women

who had been either arrested or in Correctionary Institutions. Twenty-five per cent of all the men in the Infirmaries had been arrested from one to three times, four per cent from four to 10 times and 2.5 per cent more than 10 times. There were 27 men who had been in the House of Correction and 25 who had been in State Prisons. (See Table 48.)

The per cents for the Normal men were approximately the same as for the total number of men. The per cents for the Feeble-minded men were, on the other hand, considerably lower, only 10 per cent having been arrested from one to three times; two per cent from four to 10 times and five per cent over ten times.

While, as just shown, there was a smaller proportion of the Feeble-minded than of the Normals who had been arrested, yet when it comes to the proportion who had been in other institutions, the Feeble-minded exceed the Normal. Of the Feeble-minded 1.6 per cent as opposed to .4 per cent of the Normal Group had been in Hospitals for the Insane (there were 6.3 per cent of the Insane who had been in Hospitals for the Insane); 1.8 per cent of the Feeble-minded and .7 per cent of the Normal had been in State Charitable Institutions; 2.3 per cent Feeble-minded, 1.2 per cent Normal in Private Charitable; 7.2 per cent Feeble-minded, 3.9 per cent Normal in other County Infirmaries in Michigan; 1.3 per cent Feeble-minded and .9 per cent Normal in County Infirmaries in other states. The Normal individuals had been at the same County Infirmary in which they were at the time of the interview, more frequently than had the Feeble-minded individuals. Seven hundred eighty-seven of the Normals had been in the County Infirmary previously, with an average of four admissions. Two hundred twenty-six of the Feeble-minded had been in previously with an average of 2.6 admissions. For distribution of previous admissions among the groups of different mental status see Diagram XVI. This fact, however, does not imply that the Normals were more dependent but rather the opposite. The total average duration of residences of each individual in the Feeble-minded Group was 485 weeks, while that of each individual in the Normal Group was only 167 weeks. To sum up—the Feeble-minded are less excessive drinkers than the Normals and possibly correlative with this is the fact that there are fewer of them who have been arrested. However, they are a more permanently dependent and institutional class than are the Normals.

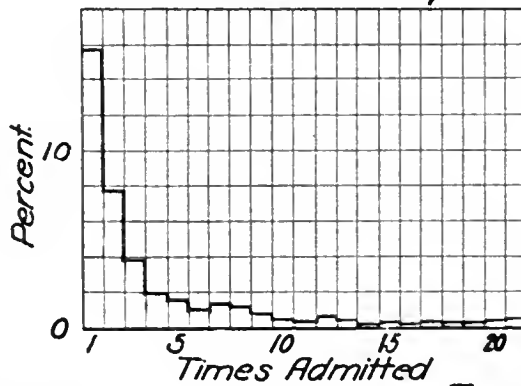
#### Physical Facts.

Before discussing the physical condition (see Table 49) of the individuals in the County Infirmaries, attention must be called to the fact that this data was obtained by non-medical investigators. These investigators were, however, familiar with the clinical symptoms of certain diseases, especially those affecting the nervous system. Due to these facts, some parts of the data discussed here and presented in the Appendix are of more value than other parts. It is felt that data relating to the different forms of paralysis, including paralysis agitans, conditions of the eye, injuries and other evident facts, is comparatively accurate. An attempt was made to verify the investigators' conclusions by information from the Infirmary Keeper and often the County Physician. This was particularly true of venereal infection. In diagnosing *tabes dorsalis*, the accepted clinical tests were used and in most cases

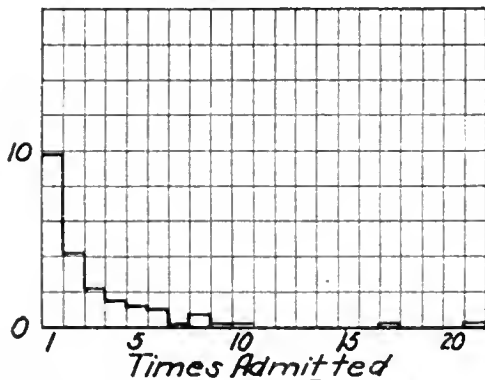
DIAGRAM XVI.

# PREVIOUS ADMISSIONS OF COUNTY INFIRMARY INMATES ACCORDING TO MENTAL STATUS

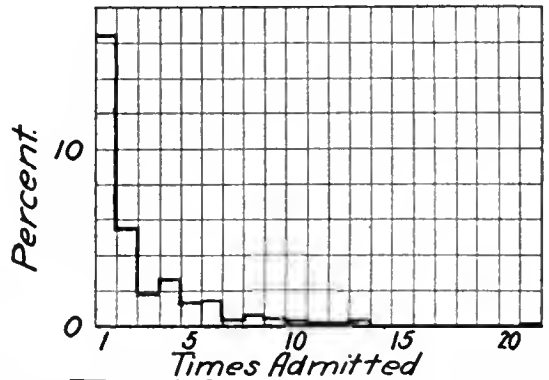
Normal Group



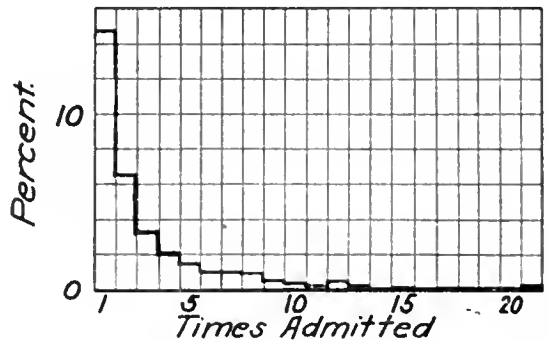
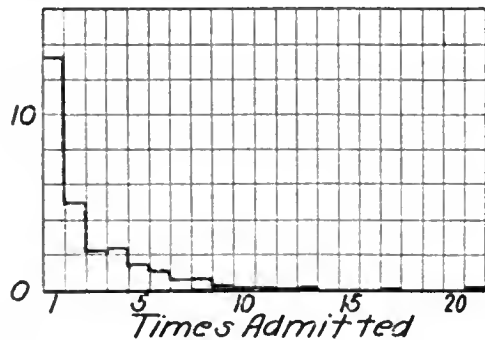
Insane



Feebleminded



Total Insane + Defective Group Total County Infirmary Pop.



a history of the case was obtained, so that on the whole, although it is realized that these facts are of limited value, they would seem to suggest the physical conditions which have a bearing on dependency.

There was 1.7 per cent of 3,334 people in the County Infirmaries who had an active syphilitic infection, while .4 per cent more had gonorrhea. While this is a relatively small percentage of the entire number of inmates, yet it is large enough to deserve consideration. In the majority of cases, the individual was resident at the County Infirmary at least partly because of this disease, yet in only one of the infirmaries was there a special detention room for such cases and even there the provision for the segregation of these cases was entirely inadequate. This means that the infirmaries are attempting to take care of a dangerous infectious disease, without any special means either for caring for the patient or for protecting the other inmates. In one of the counties, the case of a man with a very bad active syphilitic infection was detailed to the care of a feeble-minded woman who contracted the disease through lack of antiseptic precautions. There was a total of 402 cases or 12.1 per cent of the total number of inmates who either had or had had a venereal infection. There were 66 clear cases of locomotor ataxia and 15 more questionable cases (altogether 2.4% of the inmates). As another probable evidence of syphilitic infection may be mentioned 23 cases of nasal necrosis.

The two afflictions most frequently found were paralysis and rheumatism. There were 44 individuals who were suffering from paralysis agitans; 761 or 22.8 per cent of the 3,334 individuals had rheumatism. The term rheumatism is used indiscriminately, no doubt, by the inmates themselves and by the ones in charge to describe pains due to the various other causes. However, this number seems sufficiently large to indicate that rheumatism is a factor, at least, in the County Infirmary problem.

There were a large number of the County Infirmary inmates who were more or less handicapped by injuries. There were 106 cases (3.2%) of all the individuals, who were, at the time interviewed, suffering from a temporary injury; there were also 364 individuals (10.9%) who had been permanently injured.

As perhaps would be expected in a population made up so largely of older people, there were a considerable number, 6.6 per cent (222 cases), who had poor eyesight. There were, moreover, 3.4 per cent (115 cases) who were blind in one eye, while 3.2 per cent (107 cases) were totally blind, and 383 or 11.5 per cent of all the cases were deaf.

There were 84 individuals who were tubercular. There were 13 cases of chorea. Chart 14 shows something of its inheritance and the part which it sometimes plays in dependency.

The most important of the other physical conditions found among the inmates were seven cases of pregnancy, 24 of thyroid enlargement, 70 of spinal curvature and 27 probable cancerous cases.

The thing which stands out most prominently in a comparison of the data relating to the physical condition of the groups of different mental status is that the Normal Group was considerably more physically incapacitated than was the Insane and Defective Group. This fact evidences itself in nearly all forms of physical ailments as for instance, 16.2 per



cent of the Normal Group showed a venereal history as opposed to 6.1 per cent of the Insane and Defective Group.

On the whole, evidence seems to point to physical disability being a very tangible factor in dependency. However difficult it is to estimate its exact extent, these physical factors were found to be more prevalent in the Normal Group than in the Insane and Feeble-minded Group.

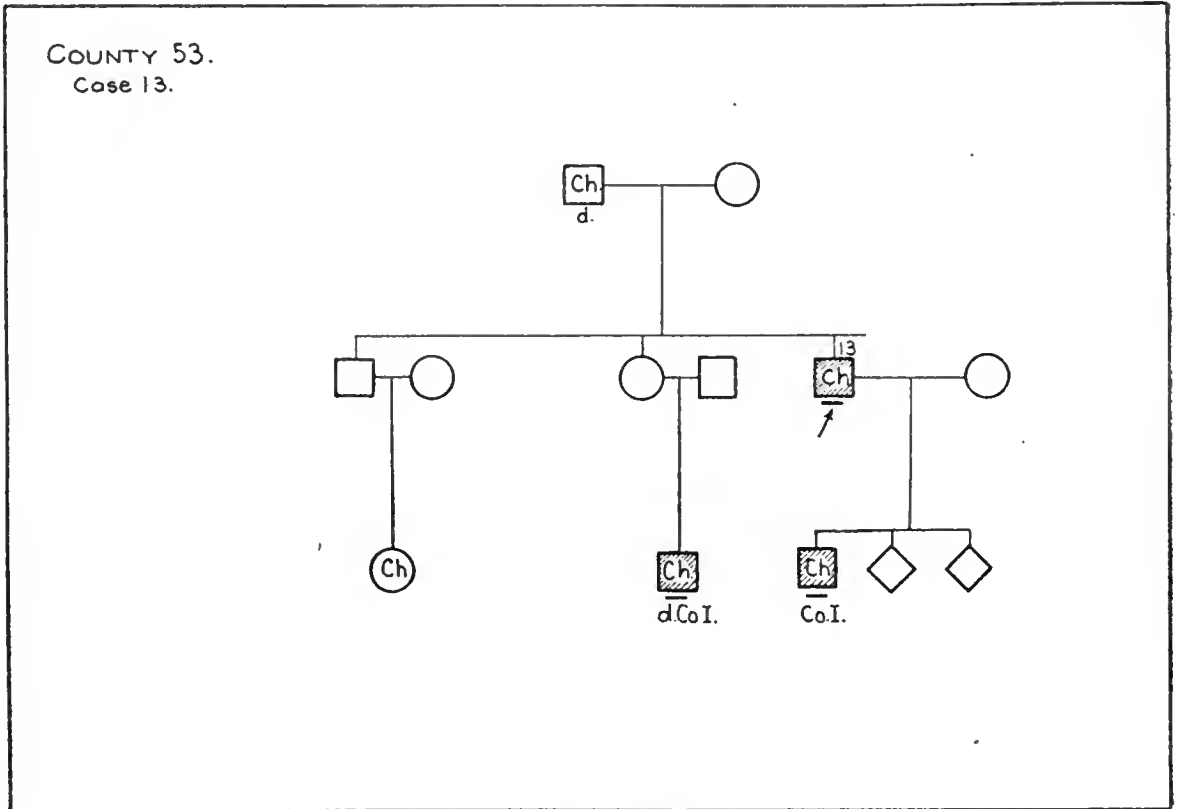


CHART 14.

This chart illustrates roughly the inheritance of chorea in one family. The patient (13) in the County Infirmary had a father who died suffering with this disease, and also a son who was at one time an inmate of the County Infirmary. Further, his sister's son died at the County Infirmary with chorea and a brother's daughter had the same disease. (For explanation of the symbols used in the above chart see first chart in Appendix.)

#### Civil Condition.

In taking up the civil condition of the County Infirmary inmates we find a number of facts which are striking. (See Table 50.) Of the total men, there were only 13.8 per cent and of the total women only 14 per cent who were married at the time interviewed. Contrast this with the 1910 census figures which give 58.3 per cent of the men and 62.2 per cent of the women of the state as married. There are 45.8 per cent of the men and 34.2 per cent of the women in the County Infirmary who have never married, while in the state there were only 36.1 per cent of the men and 27.1 per cent of the women who were single. Because of the more advanced age of the infirmary inmates these figures do not give the real difference which exists in the marital condition of the County Infirmary population and the total population of the state. Over nine-tenths (92%) of the men in the County Infirmary are over 34 years of age and of the total state male population of this age only 10.2 per cent had never married, and 80 per cent were married at the



time of the census. Nearly nine-tenths (86%) of the women in the County Infirmaries were over 34 years of age. For those in the state population who were over this age, the census gives only 6.4 per cent single and 73.7 per cent as married. We see, then, that a very much greater percentage of all the County Infirmary population than of the general population have never married, and that a very much smaller percentage was married at the time they were interviewed.

Some marked differences are found to exist in the different groups. Thus the percentage of normal women who had never married was only 13, which is much nearer the percentage found in the total female population of the state. But there were 40 per cent of the normal men who had never married. There were only 6.7 per cent of the feeble-minded women who were married at the time interviewed and there were over 57 per cent who had never married. These facts, however, are somewhat misleading, for there were 30 per cent of the unmarried feeble-minded women who had given birth to children. There were 75 per cent of the feeble-minded men who had never married. There were fewer who had always remained single in the Insane Group than in any other. Only 31.3 per cent of the insane men and 14.5 per cent of the insane women had never married.

Of the 1,781 individuals in the County Infirmaries who had been married, there were 55 per cent who had been widowed one or more times, 18 per cent who had been separated, and 11 per cent who had been divorced.

There are certain other facts which are closely related to the civil condition of the individuals studied. These facts will be briefly stated here. The facts in regard to the size of the families of the County Infirmary inmates are contrary to the generally accepted idea that the defectives have larger families than have the normals. (See Tables 51 and 54.) There were 152 individuals in the Feeble-minded Group, 211 in the Insane Group and 965 in the Normal Group who had been married or who had had illegitimate children. The individuals in the Feeble-minded Group had had an average of only 2.8 children, those in the Insane Group an average of 3.7, while those in the Normal Group had had the highest average of all, 3.8 children. There were, however, fewer of the married Feeble-minded (3.5%) who had never had children than there were of either the Insane (7.4%) or of the Normal (9.4%). But, considered again from the standpoint of the group having the largest families, we find that there were 17 per cent of the Normals who had had more than four children, while of the Insane there were 17.2 per cent and of the Feeble-minded only 6.8 per cent who had had more than this number of children.

This comparison shows that, at least, for the County Infirmary inmates, the Normal and the Insane both have larger families than do the Feeble-minded. We cannot say, however, that this invalidates the statement so generally made that the feeble-minded are reproducing at a higher rate than are the normals. It must be remembered that we are here dealing only with the dependent class. It is the poorer class that has the larger number of offspring, while those of the wealthier class, the lower birth rate. This would tend to make the average number of children born to normal parents much lower and, on the other hand, it is safe to assume that the number of children born to the Feeble-minded

who have been for a considerable period in the County Infirmaries (the average period of the last residence was 8.4 years) is less than the number born to those who are living at large.

Of the married and those who had illegitimate children there were in the Feebleminded Group only 17.3 per cent who have children still living, while in the Insane Group there are 36.2 per cent and in the Normal 36.1 per cent who still have living children. There are 16.7 per cent of those in the normal group; 14.3 per cent of those in the Insane Group and 6.1 per cent of those in the Feebleminded Group who have more than two children living.

There are 71 unmarried individuals (of whom 53 were feebleminded women) who had given birth to 121 children. (See Table 52.) There were 20 married women (of whom 19 were feebleminded) who had given birth to 30 illegitimate children, making a total of 91 women having had 151 illegitimate children. Nineteen of the inmates in the Infirmaries were of illegitimate birth. Three of these were Normal, nine Feebleminded, (illustrated by chart 16), one Insane and six of Questionable men-

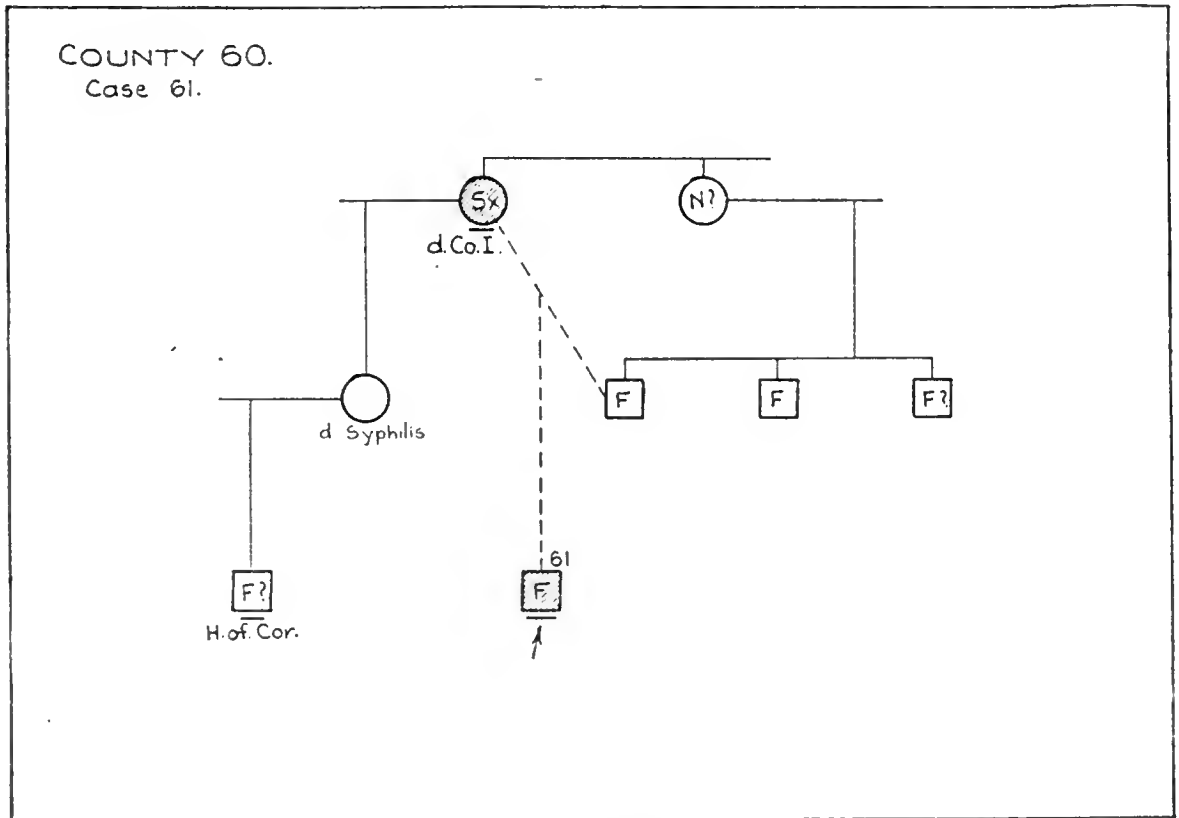


CHART 16.

This chart shows the back-ground of a feebleminded man (61). His mother, a prostitute who died at the County Infirmary, cohabited with his father, her own feebleminded nephew. His father had two brothers who were feebleminded and on his mother's side there was a daughter who died of syphilis and a feebleminded grandson who had been in the House of Correction. (For explanation of the symbols used in the above chart see first chart in Appendix.)

tality. Fourteen of the individuals now in the County Infirmaries had been born there. (See Table 53.) Of these only one was Normal, nine were Feebleminded, and four were of Questionable mentality. Fifty of the present inmates had given birth to children, 72 in all, in the County Infirmaries. Forty-six of these 50 inmates were Feebleminded,

three were Normal and one was Insane. Of the 72 children, 68 were born of feeble-minded mothers.

There seems to be a tendency for different members of the same families to be in the County Infirmaries. There were at the time of the investigation 96 families who had more than one member living in one of the County Infirmaries. (See Table 55.) Chart 11 shows families

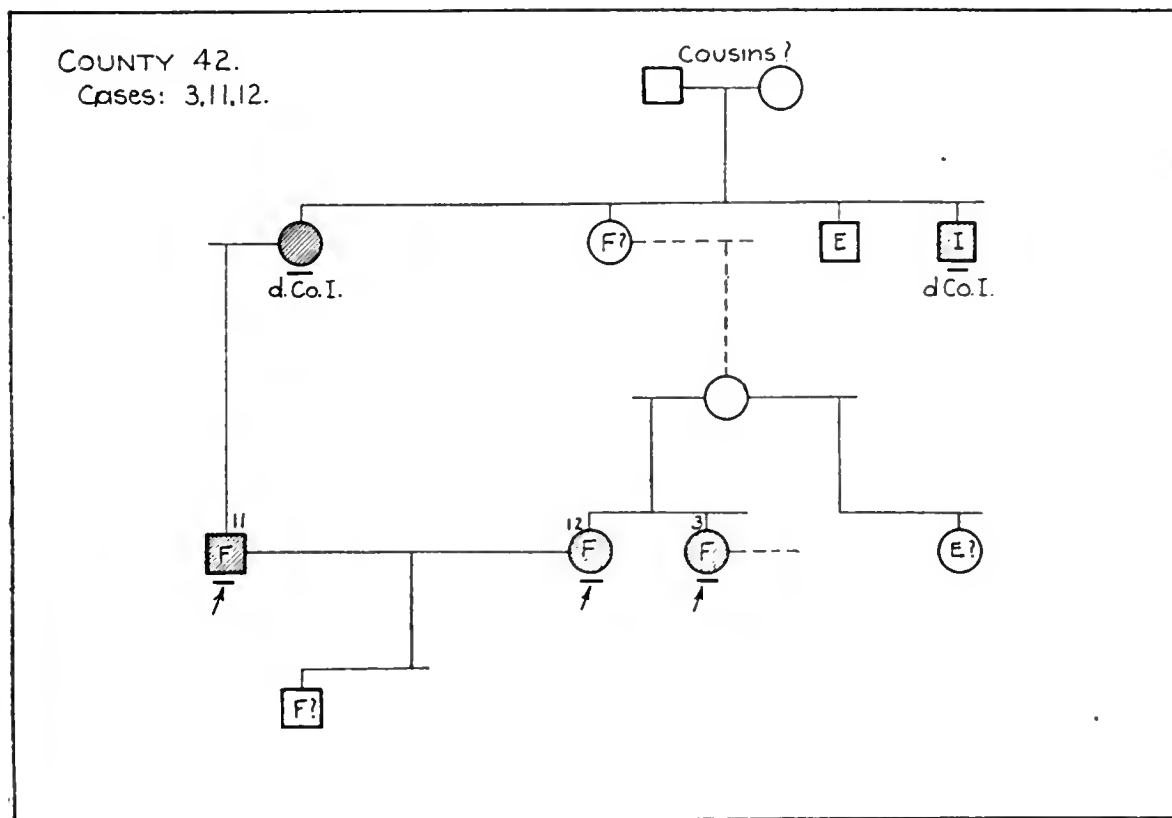


CHART II.

In the first generation there is the marriage of two individuals who were probably cousins. Two of their children died in the County Infirmary, one of whom had a feeble-minded son (No. 11), who is at present an inmate there. Another daughter of these old people was feeble-minded and had an illegitimate daughter who in turn had two feeble-minded daughters by her first marriage. These two daughters, (No. 12 and 3) are also inmates of the County Infirmary. The older of these (No. 12) is married to her second cousin (No. 11). Of this marriage, there is, at least, one probably feeble-minded son. (For explanation of the symbols used in the above chart see first chart in Appendix.)

illustrating this. These 96 families contributed altogether 219 members to the population of the County Infirmary.

There were 165 individuals who had, either at the time of the investigation, or had had previously, one or more blood relations (280 in all) in the infirmaries. (See charts 10 and 21.) There were 227 individuals who had either blood relations or relatives by marriage (359 in all) who were or had been in the County Infirmaries. There were 117 cases in which both husband and wife were or had been in the infirmary.

There were a number of the relatives of the infirmary inmates who had been in other institutions. Twenty-four of the relatives of these inmates had been in other County Infirmaries; 76 had been in the State Public School; 27 had been in the Lapeer Home and Training School; 75 had been in Hospitals for the Insane; 20 had been in State Prisons. Facts were learned about the mental condition of a part of the relatives of the infirmary inmates. There were 227 relatives of these inmates

who were feeble-minded (see chart 25), 46 who were epileptic; 127 who were insane. (See Table 55 and Charts 2, S.)

### Sex.

Diagram XVII shows, that in proportion to the numbers of each sex in the total population of Michigan, there are nearly three times as many men as women in the County Infirmaries. It also shows that, on the same basis, there are over five times as many men of Normal Mentality

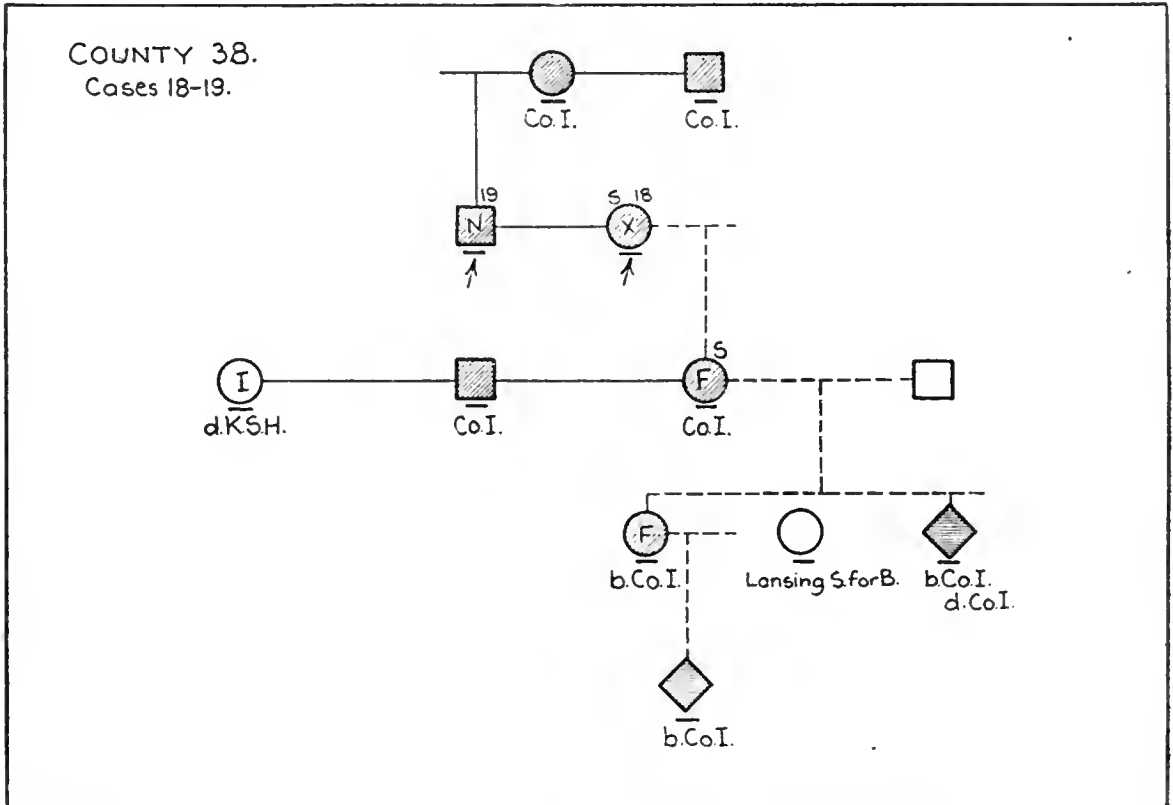


CHART 10.

This chart shows an old man and his wife (18, 19) who were inmates some twenty years ago in another County Infirmary than the one in which they were interviewed. They decided to be married and although no children came of this union, they united two strains which are worth noting. On his side, his mother and step-father were both in the County Infirmary. She, on the other hand, had, among other children, an illegitimate daughter who was feeble-minded, syphilitic and irresponsible sexually. This daughter had at least two consorts, one to whom she was married and who had been in the County Infirmary, and the other who is the father of at least three of her illegitimate children. Two of these three children were born at the County Infirmary. One of them, feeble-minded and sexually immoral like her mother, has given birth to an illegitimate child in the County Infirmary. The striking thing about this chart is that here we have a great-grandmother, probably, in the County Infirmary, whose illegitimate feeble-minded daughter, granddaughter and great-grandchild have all been dependent on the County. (For explanation of the symbols used in the above chart see first chart in Appendix.)

in the County Infirmaries as there are women of Normal Mentality, while the proportion of the two sexes in the Insane and Defective Group is very nearly equal..

The question of chief interest in relation to the dependency of the sexes is this: Why should we find that for every normal woman in our County Infirmaries there are nearly six normal men? The interest in this question is increased when we find that, on the whole, the normal

men are younger than the normal women, and ought, therefore, to be more capable of caring for themselves. Of the normal women 65.2 per cent and only 52.1 per cent of the normal men are 65 or over, while 12 per cent of the men as opposed to 8.6 per cent of the women are less than 46 years old.

The only way to answer this question is to study all the facts which were ascertained in regard to the normal men and women. The men of the Normal Group have had better educational advantages than have the women. While about an equal proportion of the two sexes have been to high school and college, yet there were 76 per cent of the men as

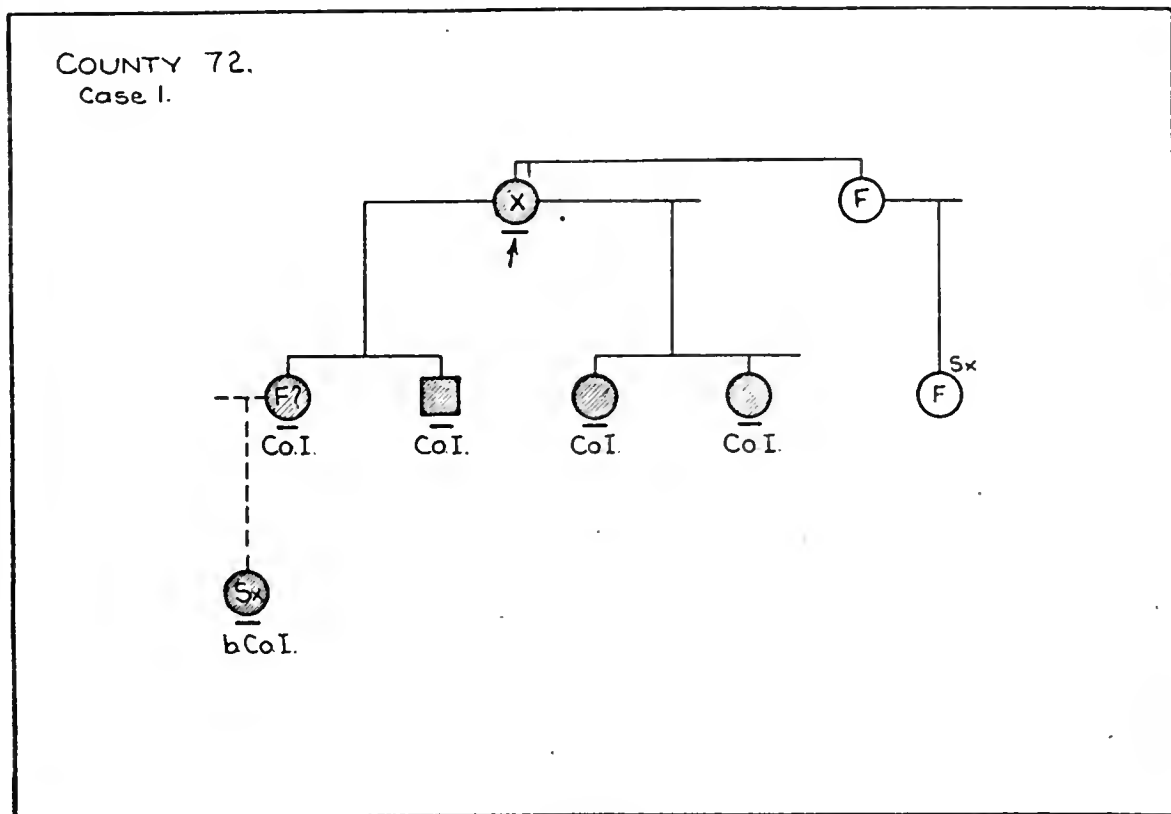


CHART 21.

This woman (1) besides having a feeble-minded sister, has had four children all of whom have been in the County Infirmary. One of them, probably feeble-minded, had an illegitimate child born in the County Infirmary, who in turn is proving herself to be sexually immoral. (For explanation of the symbols used in the above chart see first chart in Appendix.)

opposed to 70 per cent of the women who had been to common school. There were only 29 per cent of the normal men as against 37 per cent of the normal women who were illiterate. Inferior preparation to cope with society does not seem, therefore, to have caused more men than women to have become dependent.

Analyzing the data relative to the physical condition of the mentally normal of the two sexes, we find some facts that may help, at least, a little, in the answering of our question. The two diseases, (namely, paralysis and rheumatism) which we have already seen to be present in the largest number of cases, are found to an almost equal extent in both sexes. About the same proportion of women as of men are found to be blind.

There were more of the men (17%) than of the women (9.7%) who were either temporarily or permanently injured. There were also more men (4.7%) than women (.3%) who were tubercular.

But it is when we come to the facts relating to the habits of the two sexes that we find the greatest difference. Thus 18 per cent of the men as opposed to 3.9 per cent of the women had, or had had a venereal disease and 4.1 per cent of the men and only 1.4 per cent of the women were suffering from locomotor ataxia. Of the normal men 45 per cent drank excessively while of the normal women only 1.1 per cent drank

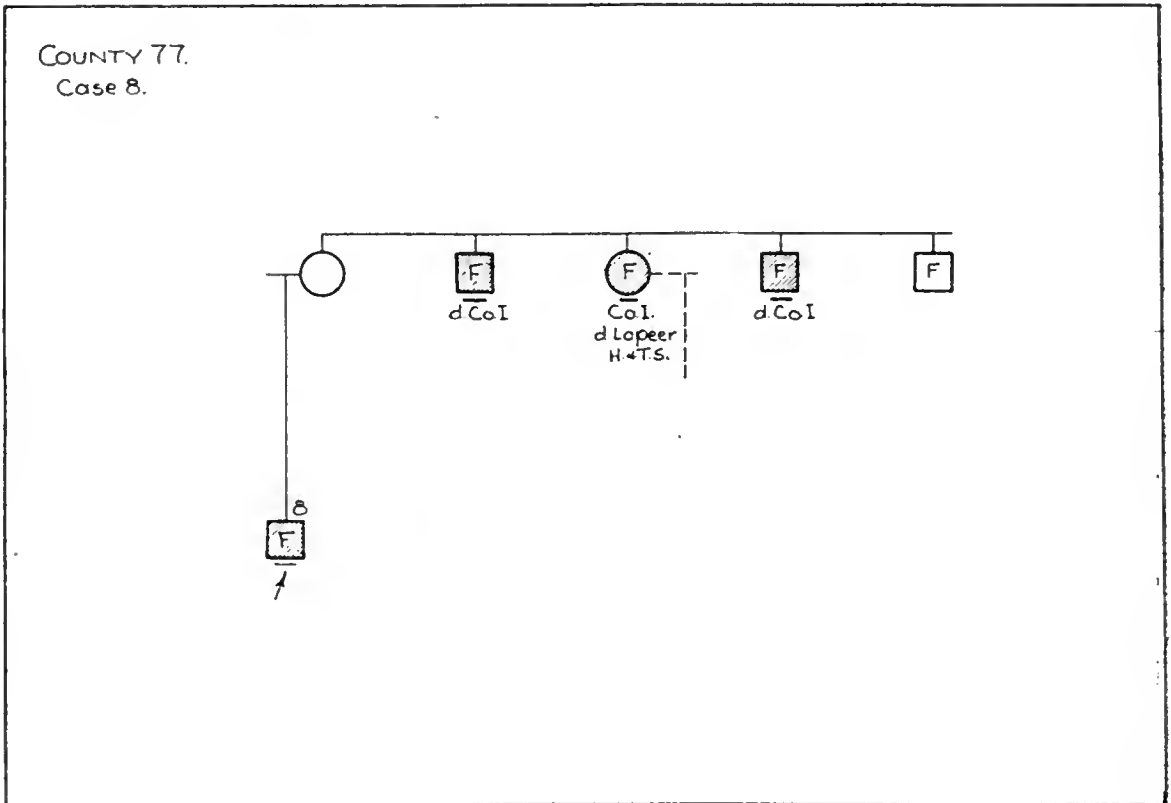


CHART 25.

This patient (8) although at present a County Infirmary resident, is committed to the Lapeer Home and Training School. He is 78 years old and his place, it would seem, could very well be filled to better advantage in the State Institution. In his mother's fraternity, there were four feeble-minded, three of whom had been at the County Infirmary and one of whom had died at the Lapeer Home and Training School. (For explanation of the symbols used in the above charts see first chart in Appendix.)

excessively. Only one per cent of the women as opposed to 34.7 per cent of the men had been arrested.

While we have not been able to find an absolute answer to our question, yet it seems safe to say that the facts at our disposal indicate rather clearly that the most probable explanation of the fact that there are so many more normal men than women in our County Infirmaries lies mainly in the loose living of the men.

#### Summary—Causes of Dependency.

Dependency implies financial impoverishment. However, it is the causes of this impoverishment in which we are interested. Occasionally the economic factor, for instance, as in the case of accidental loss of

property, seems to stand as the dominant cause, and in this sense only can it be said to be a fundamental cause of dependency. The other causes leading to impoverishment seem to group themselves under the general heads of mental condition, physical condition and habits. Here again it is seldom that we find but a single factor; more often it is a combination of factors. The relative importance of these factors would be difficult to determine even in a single case. Therefore, it was impossible to form any conclusions on this point for a large group of cases. All that can be done is to indicate the possible bearing of these factors upon impoverishment and therefore upon dependency. It is

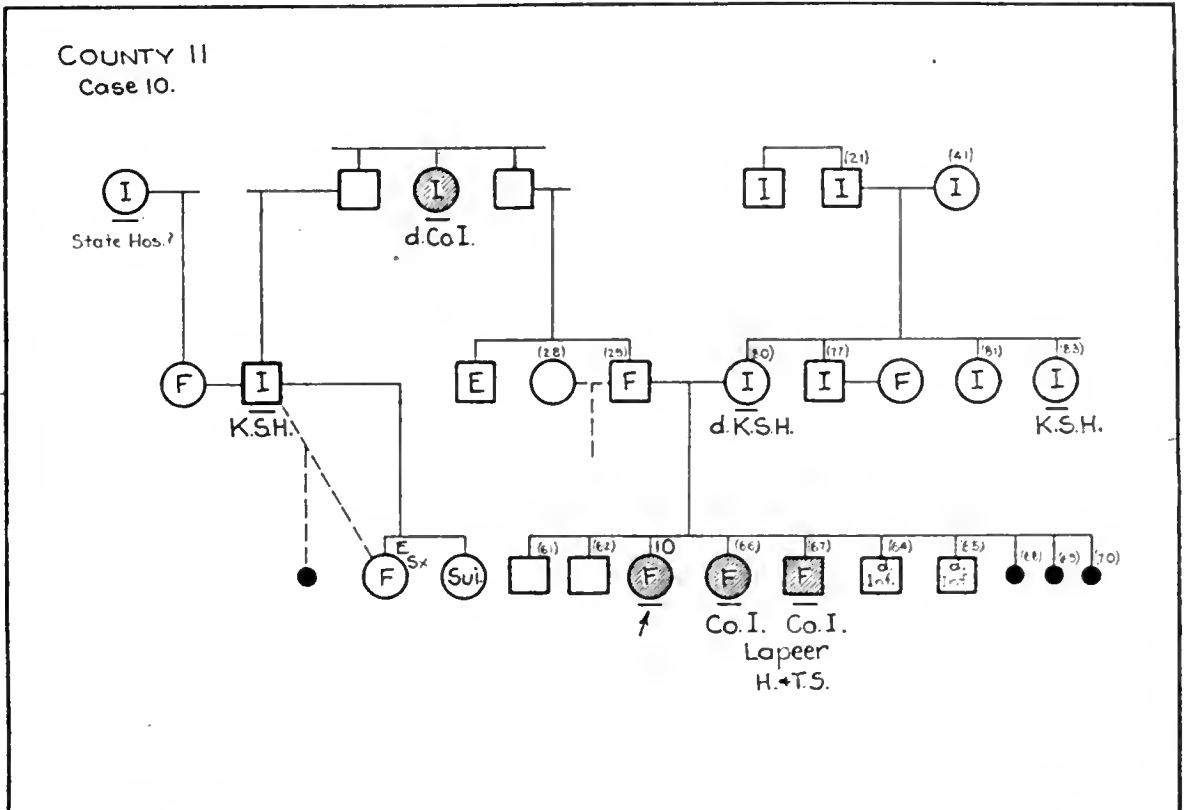


CHART 2.

Here is the case of a woman (III, 80), who was married at 17 to a feeble-minded man (III, 29). In a year a child was born (IV, 61) who later became an alcoholic, at least. His mental condition is unascertained. Soon after his birth, his mother was committed to the Kalamazoo State Hospital for a year, released, gave birth to a second child (IV, 62) whose mentality is unknown. She was sent to the hospital again for a year, released only to have three feeble-minded children, one (63) of whom is the patient interviewed, in the County Infirmary, and the other two (66, 67) have been at the County Infirmary and are now at the Lapeer Home and Training School. She also had three miscarriages and two children died in infancy. She was finally taken back to the Kalamazoo State Hospital and died there. She has a sister (83) who is at the Kalamazoo State Hospital now and another sister (81) and brother (77) who are insane. Both her mother (41) and father (21) were insane. This family has cost the State \$15,000 through its members in institutions in the state. (For explanation of the symbols used in the above chart see first chart in Appendix.)

NOTE: From facts gathered for the State Board of Health and published in Public Health, December, 1912, with some revision.

clear that in at least 39.3 per cent of the 3,334 infirmary cases, either insanity, feeble-mindedness, or epilepsy, were the causes, and probably the dominant causes, of the dependency. This was true in 65.5 per cent of the women and in only 30 per cent of the men. However, any other factor may have entered. A feeble-minded individual may have had parents, who, though themselves feeble-minded, yet were capable of supporting

their family. Sickness, accident or desertion may have removed the wage-earner, and consequently the family became County Infirmary charges. Charts 17, 19 and 26 illustrate this.

Where the factor of mental condition does not enter, the facts indicate that diseases, accidents, together with excessive alcoholism and loose sex habits are the most important causes of dependency.

With the normal women the factors very largely reduce themselves to physical condition, combining with the economic. In the case of the normal men, all the above mentioned factors enter.

To sum up, then, the causes of impoverishment and therefore, de-

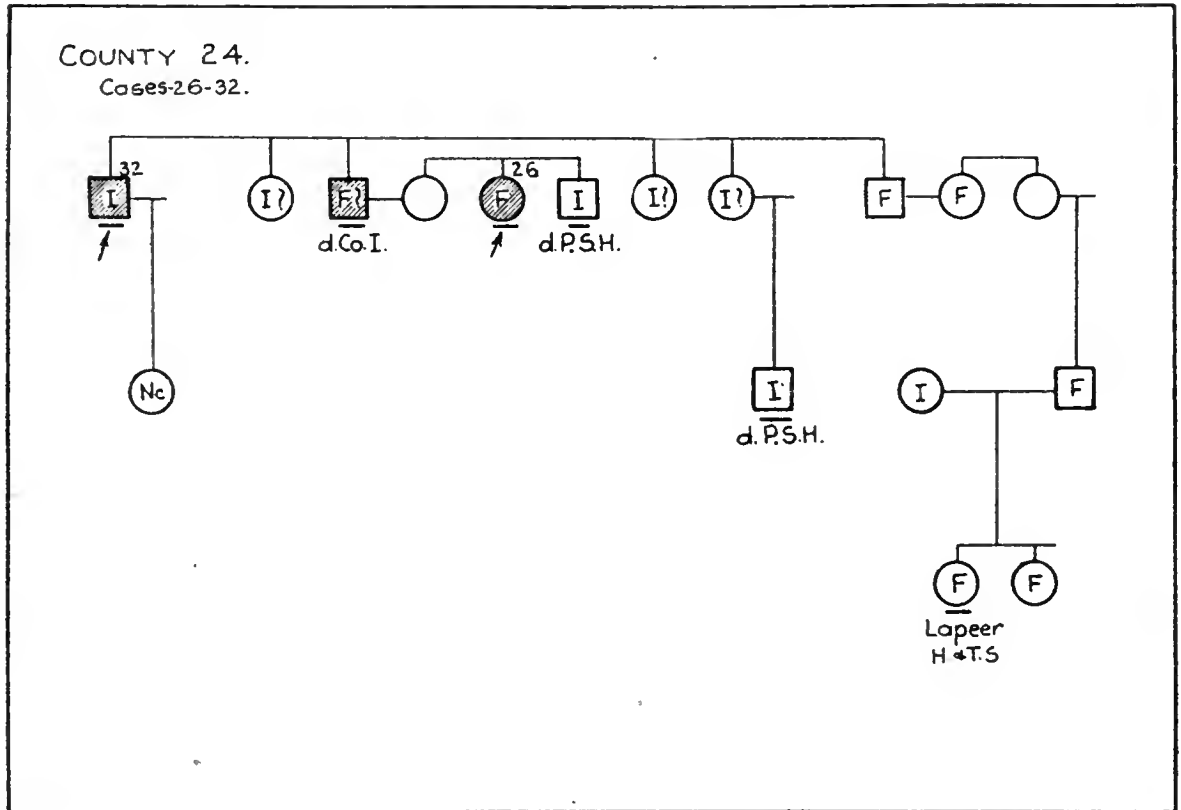


CHART 8.

This chart shows the inter-relationship of feeble-mindedness and insanity in one family and in their connections by marriage.

Case No. 32—An old insane man has three sisters who were probably insane, and two feeble-minded brothers, one of whom died at the County Infirmary. This same brother's wife's sister (Case 26) is an inmate of the County Infirmary. The other feeble-minded brother married a feeble-minded woman whose nephew is feeble-minded and has two feeble-minded daughters, one of whom is at the Lapeer Home and Training School. (For explanation of the symbols used in the above chart see first chart in Appendix.)

dependency, reduce themselves to the economic, mental, and physical condition as well as habits of the individuals. But of these, the mental condition, especially feeble-mindedness, was a factor in the greatest number cases. We, therefore, turn to a consideration of its significance in relation to dependency.

#### The Feeble-minded in the County Infirmaries.

Of the 710 feeble-minded individuals in the County Infirmaries 39 were idiots. Most of these cases were unable to care for themselves, the remaining were either imbeciles or morons, of whom it was definitely known 380 were imbeciles and 114 morons. Many of the imbeciles and all



DIAGRAM XVII.

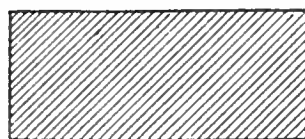
*RATIO PER 10,000 POPULATION  
OF MALES AND FEMALES IN COUNTY  
INFIRMARIES, ACCORDING TO  
MENTAL STATUS.*



*MALE*



*FEMALE*



the morons were able to do the simpler tasks of the institution. Of the morons, many were of the type that in the community at large would simply be classed as "not bright," or inefficient.

In considering the feeble-minded man, the morons and high grade imbeciles most largely represent a certain type of unskilled laborer, just capable of getting along in the world, provided no unusual situation presents itself. Others of this group represent the vagrant class. Sometimes the same individual is admitted to the infirmary several times during the same year, but more frequently he uses it as a refuge during

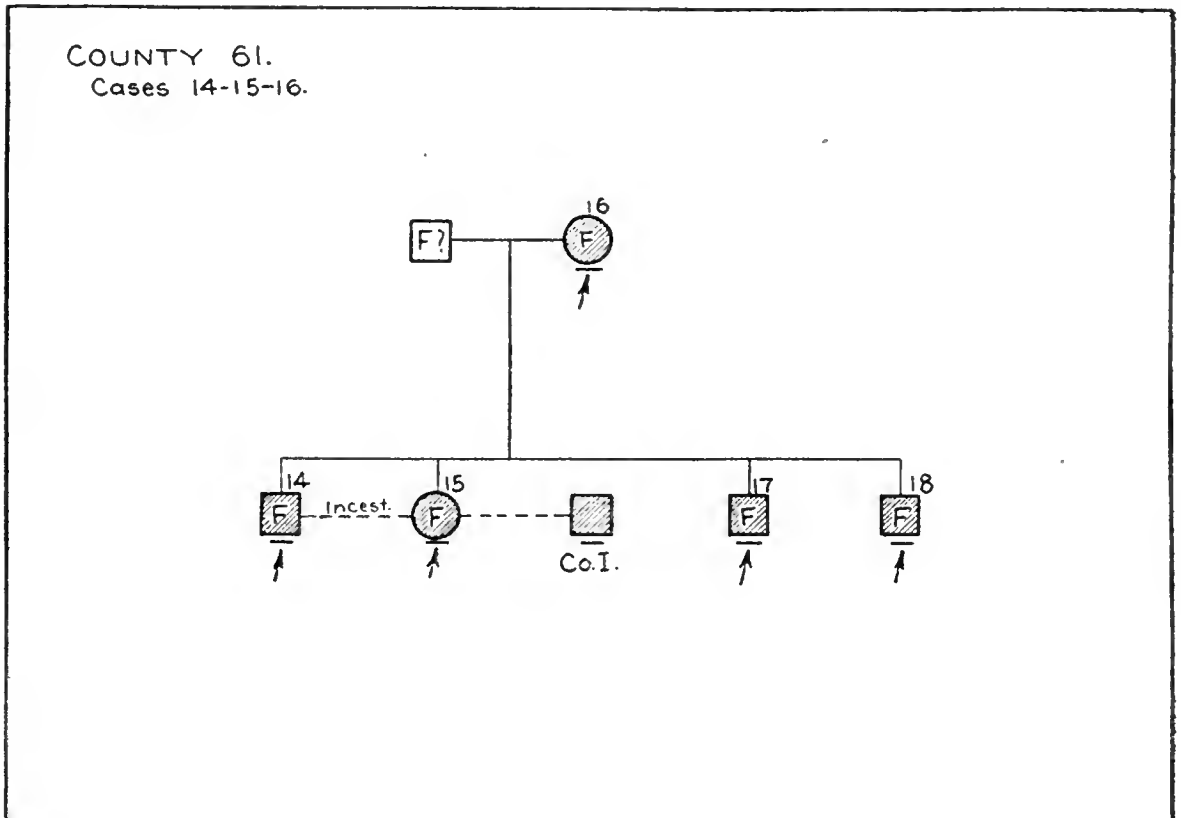


CHART 17.

Here the four feeble-minded children (14, 15, 17, 18) of feeble-minded parents, together with their mother (16) are all thrust upon the County Infirmary for care when the wage-earner, their father, deserts the family. The girl (15) has cohabited with her brother as well as another County Infirmary inmate and the entire four children are imbeciles, able to do very little toward their own support. (For explanation of the symbols used in the above chart see first chart in Appendix.)

the winter. Sooner or later, these men become permanent county charges. The following case from the infirmary of County No. 77 illustrates the way in which the infirmaries are used by these individuals, as well as the general vagrant character of the existence which they lead. James M. was 61 years old. At the time interviewed, July 13, 1914, he presented a well developed case of paralysis agitans. This fact, however, does not prevent his continued wanderings. He has a touch of good-natured Irish wit, but the mentality of a boy of ten. James has always led a free and easy existence, roaming from place to place, drinking excessively, and having contracted gonorrhea "two dozen times." He first came to the County Infirmary of County No. 77 in 1897. Since that time he has been there six different times for short periods. He has also been at the Wayne County Infirmary seven times

and at the Jackson County Infirmary once. He has served at least 60 days at the Detroit House of Correction and also two years for larceny at the Ionia Reformatory.

But James M. has never been satisfied to live quietly in one locality. During the period of years in which he has been visiting the Michigan institutions, he has also spent a part of his time in New York State. The records of the Monroe County Almshouse show that he was a resident twice. The records of the Cheemung County Almshouse show that he was resident there in 1900. These records also state that he is feeble-minded. In 1901 he was sentenced to the Erie County Penitentiary on

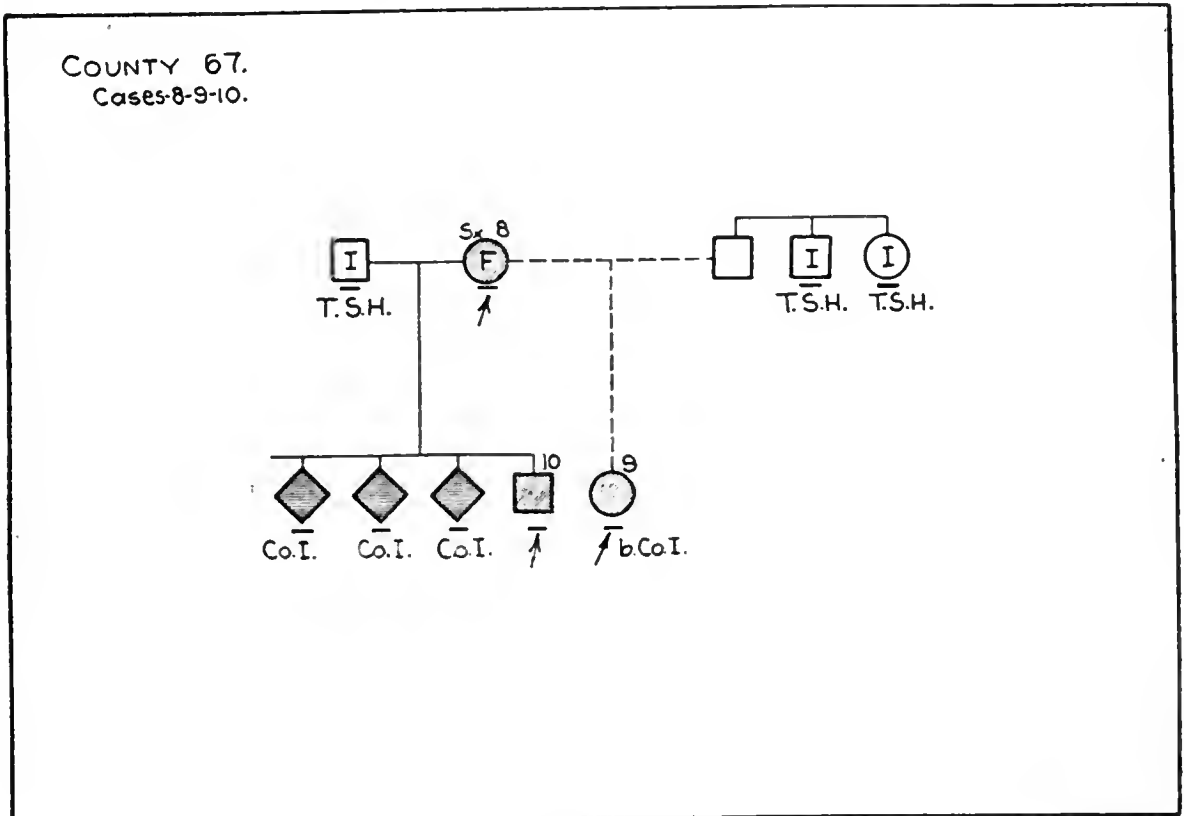


CHART 19.

Here is an instance where the removal to an Insane Hospital of the wage-earner because of mental derangement has resulted in his feeble-minded wife (8) and family of four children all becoming county charges. A fifth child (9) was born to her in the County Infirmary, but the father of this child is not her husband, but a man who may also bring the taint of insanity to the offspring, since two of his fraternity are in the Traverse City State Hospital. (For explanation of the symbols used in the above chart see first chart in Appendix.)

a vagrancy charge. The following letter written by the Superintendent of the Poor of Ontario County, New York, under date of October 27, 1914, gives evidence of his vagrancy:

"Know nothing of him except that he comes every year or two and stays one month or so and departs. He has now arrived at the County Home, I suppose from Michigan, and will probably stay until the wanderlust overtakes him again. He is partially paralyzed, and shuffles around but seems to be able to go anywhere he wants to go on free transportation."\*

\*For New York data we are indebted to Dr. Gertrude E. Hall, of the New York State Board of Charities, the Bureau of Analysis and Investigation.

James also claims to have served terms in penal institutions in Washington, D. C., in Rochester and Buffalo, N. Y., in Chicago and in Jackson State Prison, but these latter facts were not verified.

The moron man undoubtedly has a bearing on the problem of feeble-mindedness. However, just what this bearing is, just how much he contributes to the propagation of the feeble-minded class, is not clear. He is a less well defined type than is the moron woman. Her relation to the problem can be definitely seen. It is best that there be a full realization of her contribution to the increasing burden of defectiveness

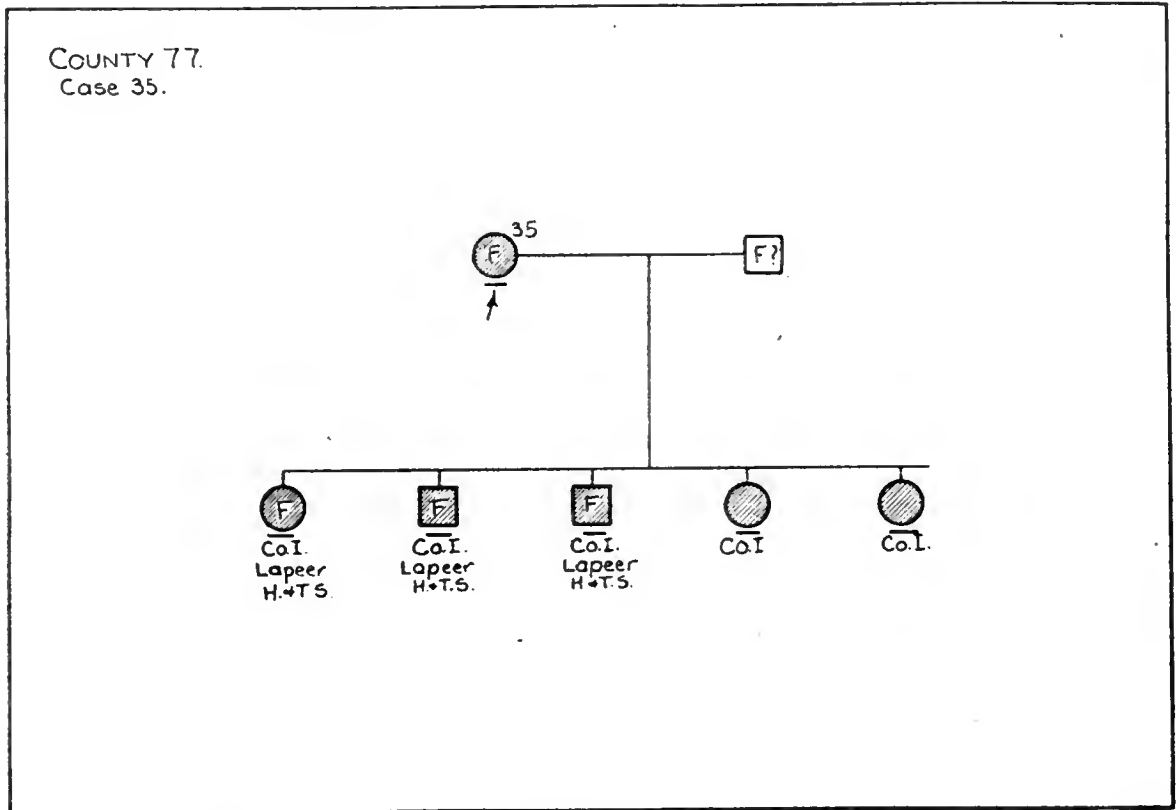


CHART 26.

Although the union of these two feeble-minded parents was apparently legalized by marriage, the father soon deserted the family and left the mother (35) and five children to be dependent on the County Infirmary. The three older children were feeble-minded and have found their way to the Lapeer Home and Training School, while the whereabouts of the other two are unknown. (For explanation of the symbols used in the above chart see first chart in Appendix.)

which the state is bearing, together with a sincere attempt to cope with the situation in an adequate manner. This is the only immediate and tangible way of attacking the problem.

It is our intention to show from the facts obtained concerning the feeble-minded woman at the County Infirmary just what her relation is to the problem of feeble-mindedness.

This relation can best be shown by a study of typical cases from among those interviewed at the infirmaries. Chart 7 and Chart 22 give good pictures of the high grade feeble-minded girl. The first case shows how this type of girl is a menace to the community while at large and the second illustrates how equally much of a menace she is when confined in an institution which does not effectively segregate.

COUNTY 24, CASE 15. Mary, 16 years old, is a slight, pretty girl of medium height, blue eyes, and pink and white complexion. She seemed diffident at first, because she had recently lost almost all of her pretty light brown hair. However, her shyness soon wore off and she proved to be an appealing, acquiescent sort of child, with a ready smile and a good deal of charm. Her physical history was negative, until about the time she was brought to the County Infirmary, when it was found she had syphilis, and could not be sent directly to the Adrian Industrial Home, where she had been committed. She was receiving treatment at the County Infirmary and showed marked improvement.

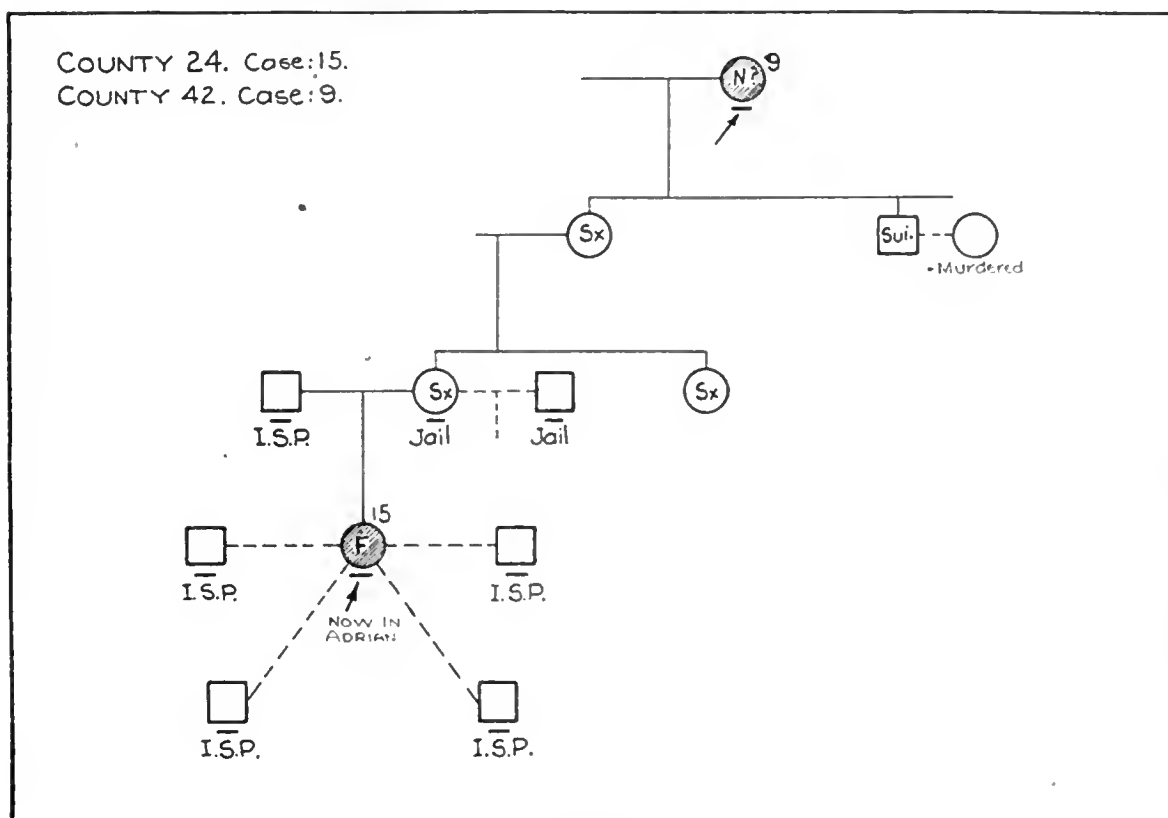


CHART 7.

The great-grandmother (9), who is in one County Infirmary in the state is the first of four generations of women who are sexually irresponsible, the youngest of whom (15) is in an adjacent County Infirmary. Four of the men who have cohabited with her are in the Ionia Reformatory. (For explanation of symbols used in the above chart see first chart in Appendix.)

Mentally, the Binet Test showed her to be about ten and a half years old. In the judgment of the investigator this was a fair index of her mental development. She proves to be easy to manage at the County Infirmary, helps with the work when forced, but is inclined to be lazy. In talking of her sexual irregularities she is very frank. Although she seems to realize, in a vague way, that she did wrong, she disarms one by asking "why her mother should have let such things go on if they were wrong."

In spite of the fact that she inherently lacks moral stamina and power to resist temptation, undoubtedly her plea is fair and her background has much bearing on her case.

Little is known of her father except that he served two years in the

Jackson State Prison for chicken thieving. When he came home and found his wife living with another man, he walked out and has not been back since. There is little doubt that Mary's mother is promiscuous sexually. She was also convicted of chicken thieving, but the case was dismissed because of her small children. She was subsequently sent to jail for violation of the compulsory school law and later arrested for "disorderly conduct."

It was interesting to find in visiting another County Infirmary that her grandmother, Mary's great-grandmother was a resident there. She verified a number of the facts in regard to her granddaughter, as well as in regard to her own daughter, who was irresponsible sexually, with

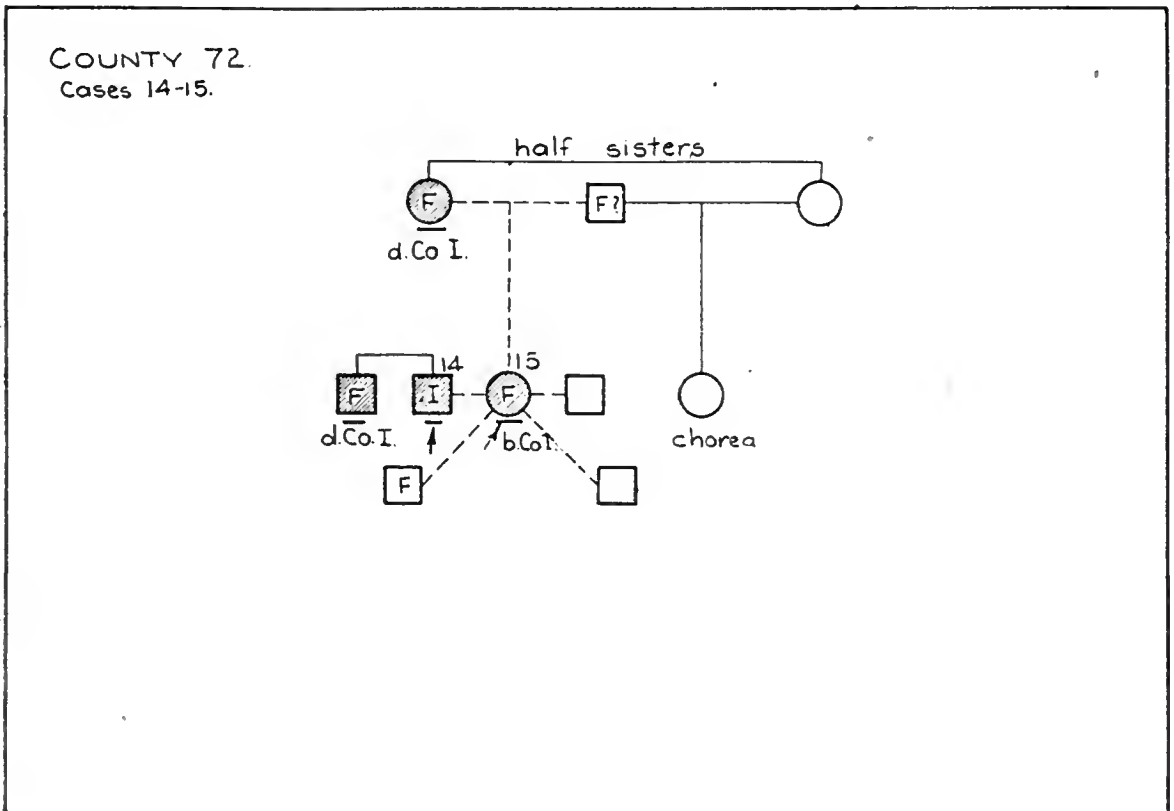


CHART 22.

This high grade Imbecille girl (15) is the illegitimate offspring of two feebleminded parents, one of whom, her mother, died in the County Infirmary. (For explanation of the symbols the above chart see first chart in Appendix.)

specific history at one time. Her son, she at length reluctantly told the investigator, had got "mixed up with another man's wife, shot her and himself,—it was a famous murder case in its day."

It is not surprising then to find Mary committed to Adrian for sexual immorality. Four of the men are now in the Ionia Reformatory for statutory rape while one is still awaiting his trial. Since the interview with the investigator, Mary has been taken to the Adrian Industrial Home for Girls. When one considers that Mary is a feebleminded girl of the moron type, it would seem that such a disposition of the case is a grave error in judgment.

COUNTY 72, CASE 15. This girl shows many of the same characteristics







However, it must not be thought that the children of the unmarried feeble-minded woman are any more of a burden to the community than those of the married woman of this same type. That the results of a legalized marriage are no less disastrous to the community is clearly demonstrated by Charts 1, 18.

Yet we are continually allowing such marriages to take place. We are not only allowing, we are aiding and abetting. In County 13, the investigator noticed this entry on the infirmary record, "Mary Doe,

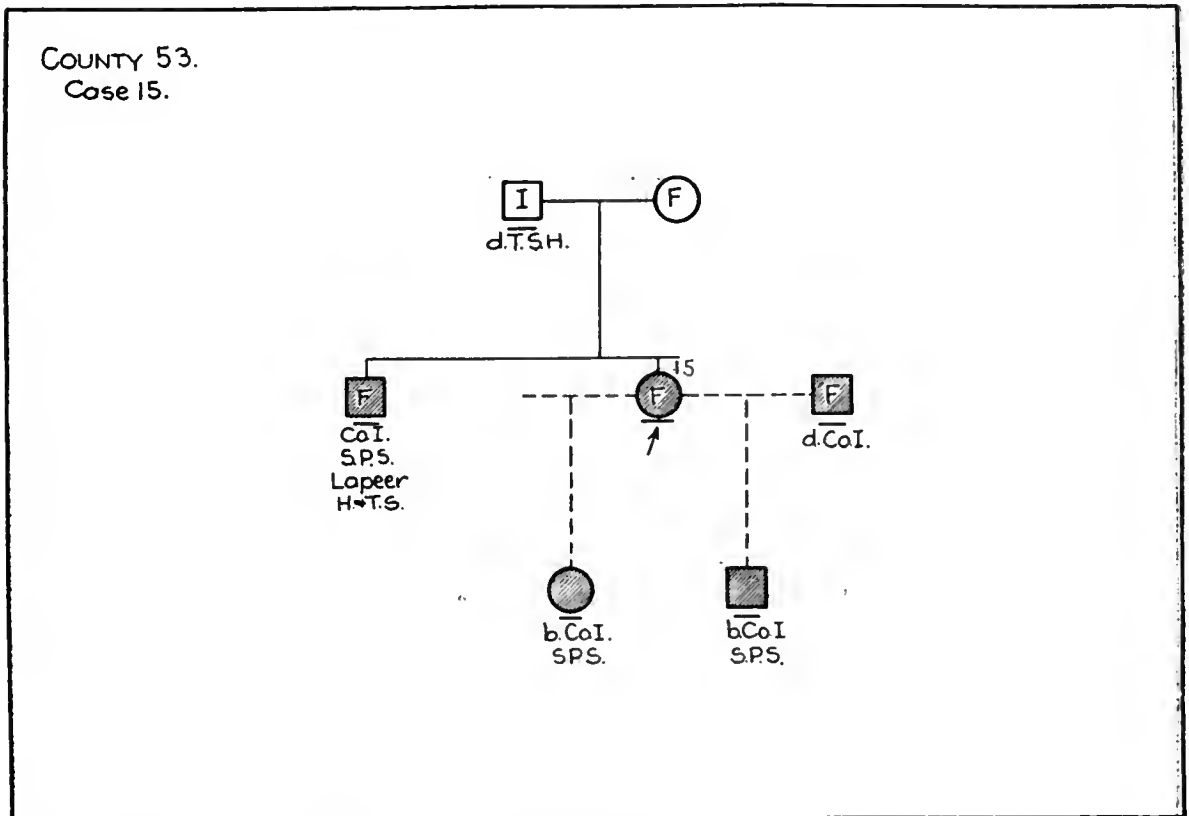


CHART 15.

Although there are few individuals represented on this chart, it would seem as though there was sufficient to indicate that some different means of caring for the inmate interviewed (15) should be provided. Her father died insane at the Traverse City State Hospital and her mother is feeble-minded. Her older brother, a resident of the County Infirmary and the State Public School, is now in the Lapeer Home and Training School and the girl herself, of a mental age of about 5 years, has had two illegitimate children born at the County Infirmary and sent to the State Public School. The father of one is unknown, while the father of the other was a feeble-minded man who died in the County Infirmary. (For explanation of symbols used in the above chart see first chart in Appendix.)

Feeble-minded." After this entry was given the date on which she was removed from the infirmary by the supervisor from her township "to get married." The history of this particular case could not be traced, but it is known that this county is paying highly for its shortsightedness. Over 50 per cent of the people its taxpayers are supporting in the County Infirmaries are either feeble-minded or epileptic. Chart 3 shows how this County is burdening itself with defectives and dependents.

The entry record quoted above was of a happening of several years ago. And while it is felt that such instances of shortsightedness on the part of the officials dealing with the dependent defective are becoming less frequent, yet similar instances are still to be found. In County 43

there was a case in point. (See Chart 13.) Here was a feeble-minded girl with the mentality of a child  $7\frac{2}{5}$  years of age who had come to the infirmary three years previously to give birth to an illegitimate child. Recently she had been courted by a man of questionable mentality, who had some property and was offering to marry her. It seems incredible that in the summer of 1914 she was discharged from the county books "to get married." A similar case was noted in County 38, Case 51, where a feeble-minded girl who tested 9 years of age mentally was discharged June 6, 1914, "to get married."

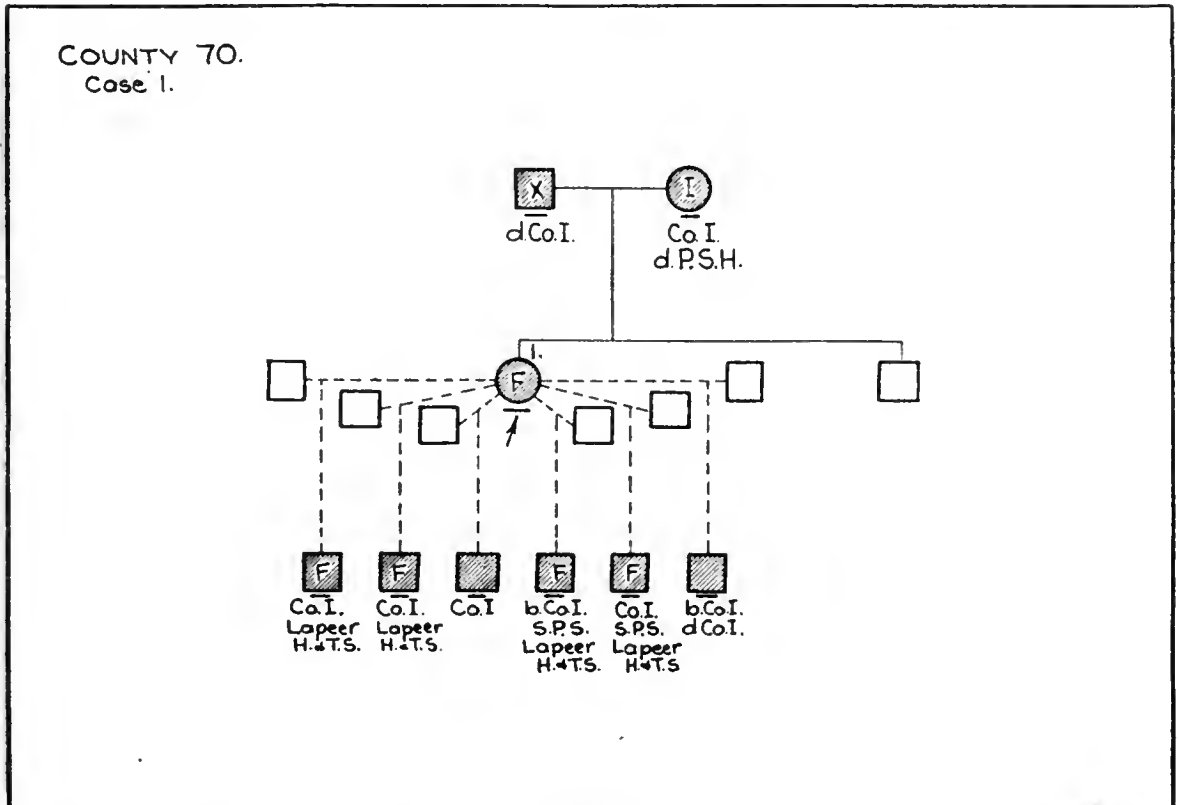


CHART 20.

The father of this woman died in the County Infirmary and her mother was taken from the County Infirmary to the Pontiac State Hospital, where she died insane. She herself tests by the Binet  $5\frac{4}{5}$  years mentally and is about 42 years old. By six different and unknown men, she has given birth to six boys, all of whom have been in the County Infirmary at some time in their lives and two of whom were born there. Four of these boys are now in the Lapeer Home and Training School, one is dead and one she has lost track of. (For explanation of the symbols used in the above chart see first chart in Appendix.)

And again in County 75, we find the case of a feeble-minded woman whom the authorities would not allow to be married *because the suitor would not pledge half of his property to her support*. The prolificacy of such a marriage—and of the marriage which will probably take place as soon as the authorities can find a man who will buy his right to the woman by relieving the county of her keep, can be seen by Chart 23 which shows the number of children she has already borne.

This woman represents a very common type of the moron. And the picture which the investigator, Miss McKinnie, has given of this case depicts the type so well that it is here given in detail.

"Maggie."

COUNTY 75, CASE 39. Maggie is a round, dumpy woman with an expansive figure which she has never attempted to corset. Her eyes are bright and twinkling and brown, and her hair is drawn back in a tight disregard of both beauty and fashion. She takes you into her confidence directly and in the most simple and natural way conceivable. I visited her at the County Infirmary where she has lived "off and on" for the last eleven years. By the Binet Test she proved to have a mentality of a girl of nearly eleven years. Everyone there has become fond of her,

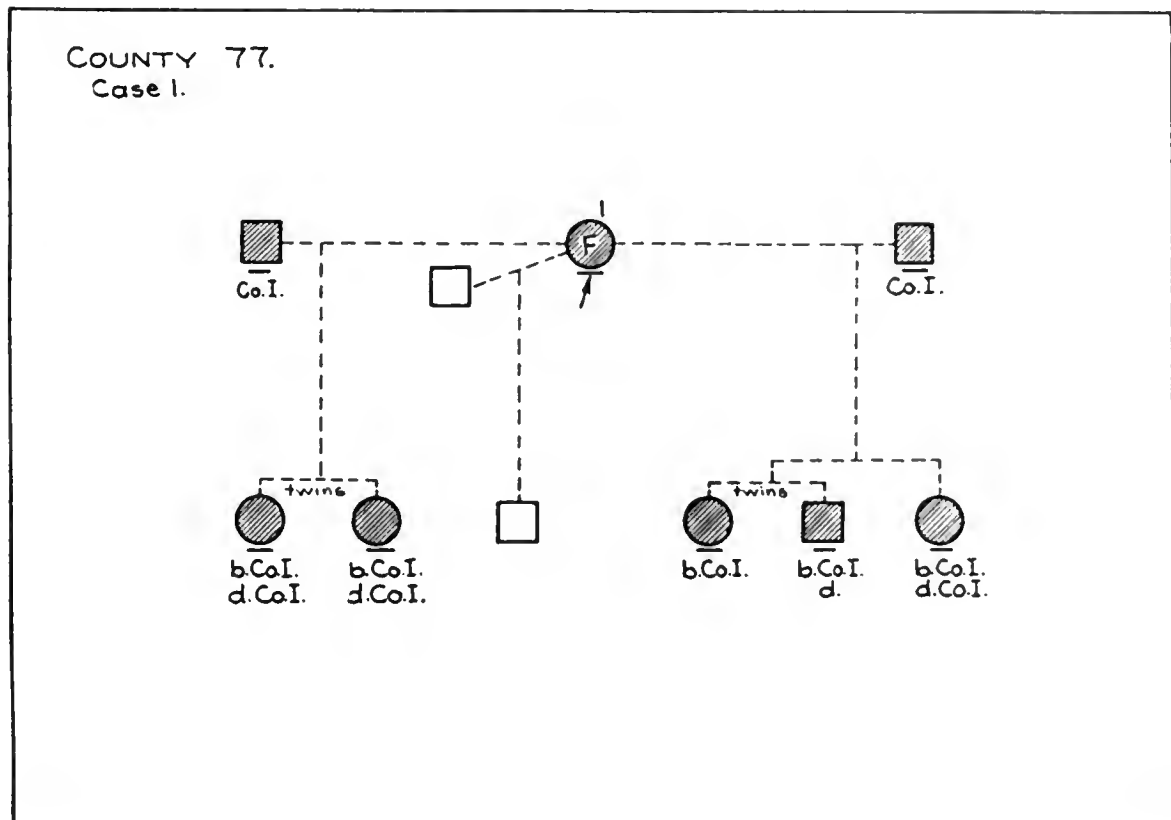


CHART 24.

This feeble-minded woman, two of whose consorts were inmates of the County Infirmary, has had six illegitimate children, five of whom were born in the County Infirmary. (For explanation of the symbols used in the above chart see first chart in Appendix.)

she writes letters for the other inmates, helps care for the sick and watches with the dead. And if she has sulky spells or sudden bursts of temper, everyone realizes that it is just Maggie, who has never controlled an impulse in her life. For Maggie expresses her philosophy in her own words: "I believe in letting what's natural, *be natural*," with an emphatic nod of her head, so convincing that you wonder if perhaps that is not best after all. But maturer deliberation makes us feel sure that Maggie is not the sort of mother we want for the next generation, in spite of her propensity to perform that highest of functions. For Maggie, mother of five illegitimate children by five different fathers, at thirty-four, wants a nice German husband to make a home for her and the possible unborn "Maggies." And the good people caring for her are wishing for her the same. Does her history warrant such a venture?

Maggie is the first of three illegitimate children her mother had by

different men, before she married the old feeble-minded, degenerate German she is living with now, and who supposedly is the father of her last four children. Maggie's father was killed before she was born, walking home one night along the tracks so drunk he did not hear the train coming. So the responsibility of her upbringing fell upon a feeble-minded mother, and Maggie was given over to the care of any one who wanted a baby girl. After several people had had her, she was sent to the State Public School, and from there was sent to a number of homes in all of which she was unsatisfactory, for one reason or another.

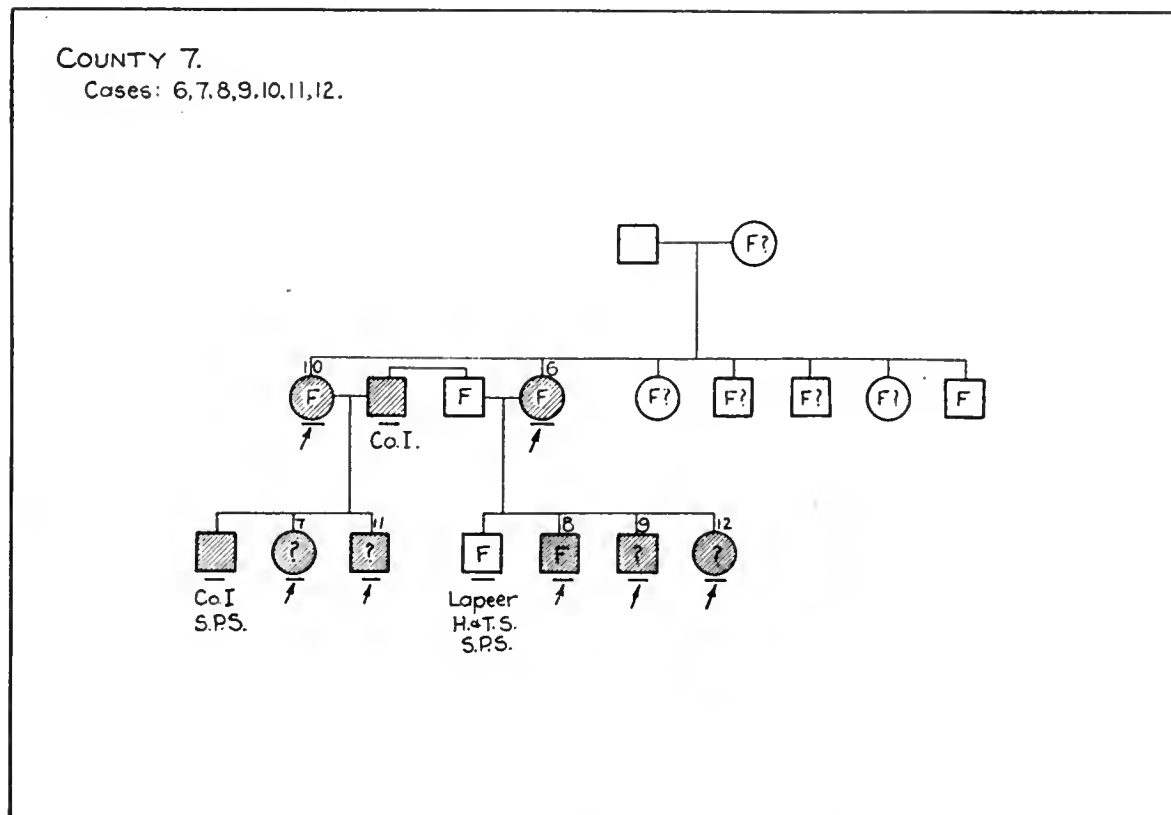


CHART I.

This shows two feeble-minded sisters (No. 10 and 6) coming of a defective family marrying two brothers, one of whom is feeble-minded. These men were unable to support their families, who had been at another County Infirmary before coming to the one in which they were interviewed, and so had brought their wives and children to the County Infirmary and had left the county. The oldest child in each of these families had been sent to the State Public School and one of these is now at the Lapeer Home and Training School. The other five children in these two families are at the County Infirmary with their mothers. The oldest of these children is six, decidedly feeble-minded and has since been taken to the Lapeer Home and Training School. (For explanation of the symbols used in the above chart see first chart in Appendix.)

One of her reports states that the man "can't bear to have her touch him, but does not mind her being around." So finally she went to live with her mother and step-father, who were getting along the best they could, doing as little work as possible. It was while she was here that her step-father used to come and "sleep with her and her half-sister, Mary." "Well, but Maggie, did your mother know he did?" I asked. "Oh, yes," she said, "she knew, but I guess she was glad to get rid of him."

One day a peddler came along and begged a night's lodging, which was accorded him hospitably. And in the course of time, Maggie was taken to the County Infirmary, where Ralph was born. "And did Ralph

live?" I asked. "No," Maggie replied regretfully. "He had spasms when he was ten days old and died. His father wasn't very bright, but he had to pay the county house two hundred dollars."

"And what happened to you next, Maggie?" Maggie settled herself with satisfaction at having found an interested listener. She continued, "Well, I went to work at a place in another county, and then I saw him." "Whom?" "Why, John. He was the hired man where I worked.... Claribel was born here, and she was a nice bright child when I last saw her—only that was twelve years ago when she was a baby, and taken

COUNTY 62.  
Cases 3-4-5-6.

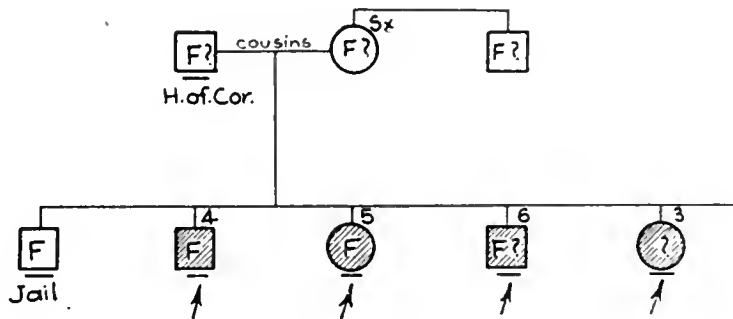


CHART 18.

When the feeble-minded father of these four feeble-minded children returned from the Detroit House of Correction he deserted his feeble-minded wife, who is a cousin, and who is now being cared for by a defective brother. The oldest boy was tested in the county jail where he was awaiting his commitment to the Lapeer Home and Training School. The other four children (3, 4, 5, 6,) are at the County Infirmary. The older three of these are feeble-minded and the youngest is too young to judge. (For explanation of the symbols used in above chart see first chart in Appendix.)

to Coldwater. I don't know where she is now." And Maggie beamed with pride at the thought of her second offspring.

Then Maggie went to work for Mr. Mitchell on his farm, and a shadow crossed her face. "He was awful mean, he was. I worked awful hard for him, from early in the morning until late at night—whatever he wanted done. Sometimes in the fields or in the barn or sometimes in the house for his wife. But she never knew he used me whenever he wanted to. He used me just like an animal—and he took good care too, that I shouldn't get into trouble."

One day, however, when Maggie was in the fields, a big, alcoholic German came along, and a few minutes together resulted in a miscar-

riage three months later. However, she was able to keep this fact from Mr. Mitchell and his wife, so that things went along undisturbed for eight years there. "Peter came to be the hired man, and one day when I was milking cows, he came into the barn..... and I just let him." "But *why* did you, Maggie?" "Oh, I don't know," she said reminiscently. After a pause—"Do you suppose I will go to heaven if I am awful good to the old ladies here all the rest of my life to make up?" "Well, what happened then?" I prodded her to resume her narrative. "Well, Mitchell was awful mad when he found it out. I thought he would kill

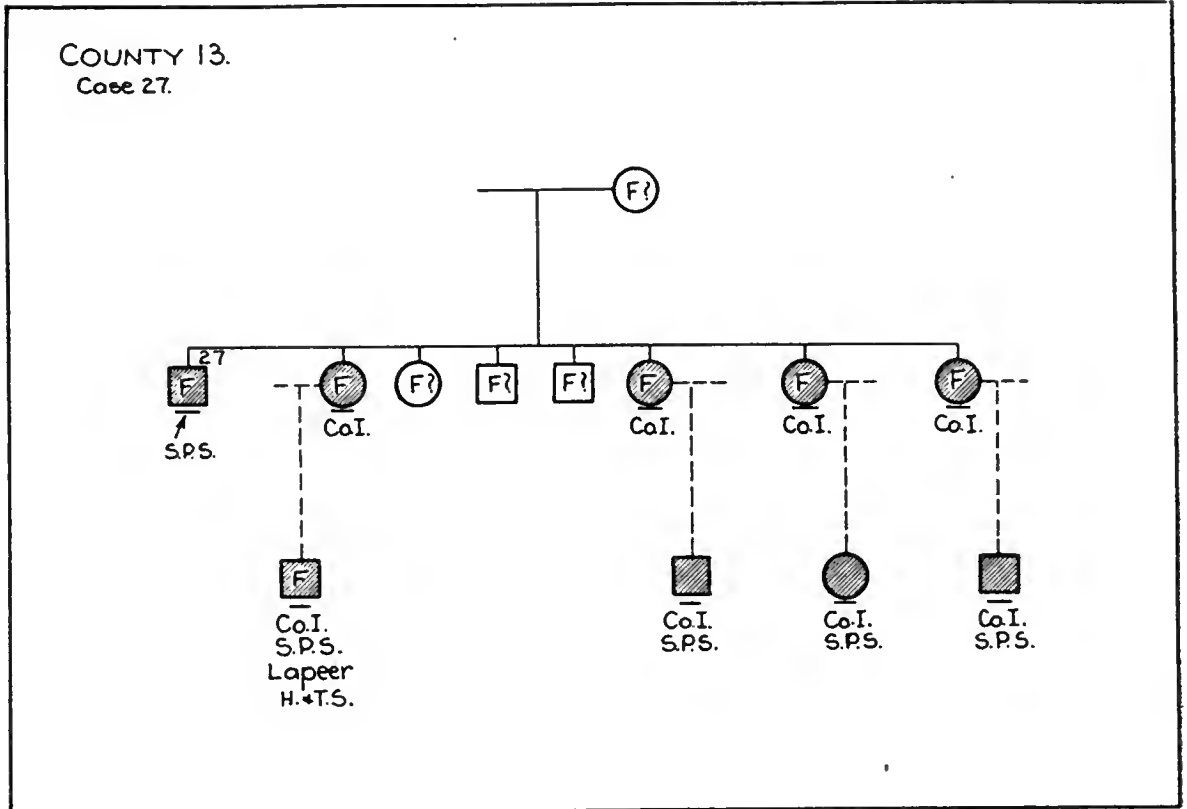


CHART 3.

This chart shows a woman in the first generation who was probably feebleminded having eight feebleminded children, the oldest of whom was interviewed (27). Four of these feebleminded daughters each had at least one illegitimate child, all of whom were in the County Infirmary and the State Public School. It is known that one of these grandchildren has reached Lapeer. So it is seen the County has paid dearly for the support of at least 9 of this feebleminded woman's progeny, to say nothing of the share the state institutions have had to bear. (For explanation of the symbols used in the above chart see first chart in Appendix.)

me. Then he sent me to Peter's house, and I just walked right in and his wife and children were there,—but I didn't care—and I just told them all, what trouble he'd got me into. He sent me over to the County House and gave me a dollar to keep my mouth shut." It was needless to ask if she had, so I asked about the child. "Oh, she was bright, and was adopted right away."

Maggie was warming to her narrative now and her eyes sparkled at the thought of her next escapade. "I was working in the country aways and he drove-out. He was a swell one. He took me for a drive with his horse and buggy and that was the only time I saw him. I just couldn't help that—he had such a lovely buggy..... Well, the baby didn't live

very long. He died of cholera infantum when he was about eight months old." And Maggie sighed, more I think, because her story must end here than because of her son's death.

Now spring fever is in Maggie's blood and she says she is going to run away one of these days and find a husband. She tried to last fall but was found before she got very far down the railroad track. She has had two offers of marriage since she has been at the County Infirmary; one from a young German with a bit of property, which was refused by the Board of Supervisors *because he refused to deed half of*

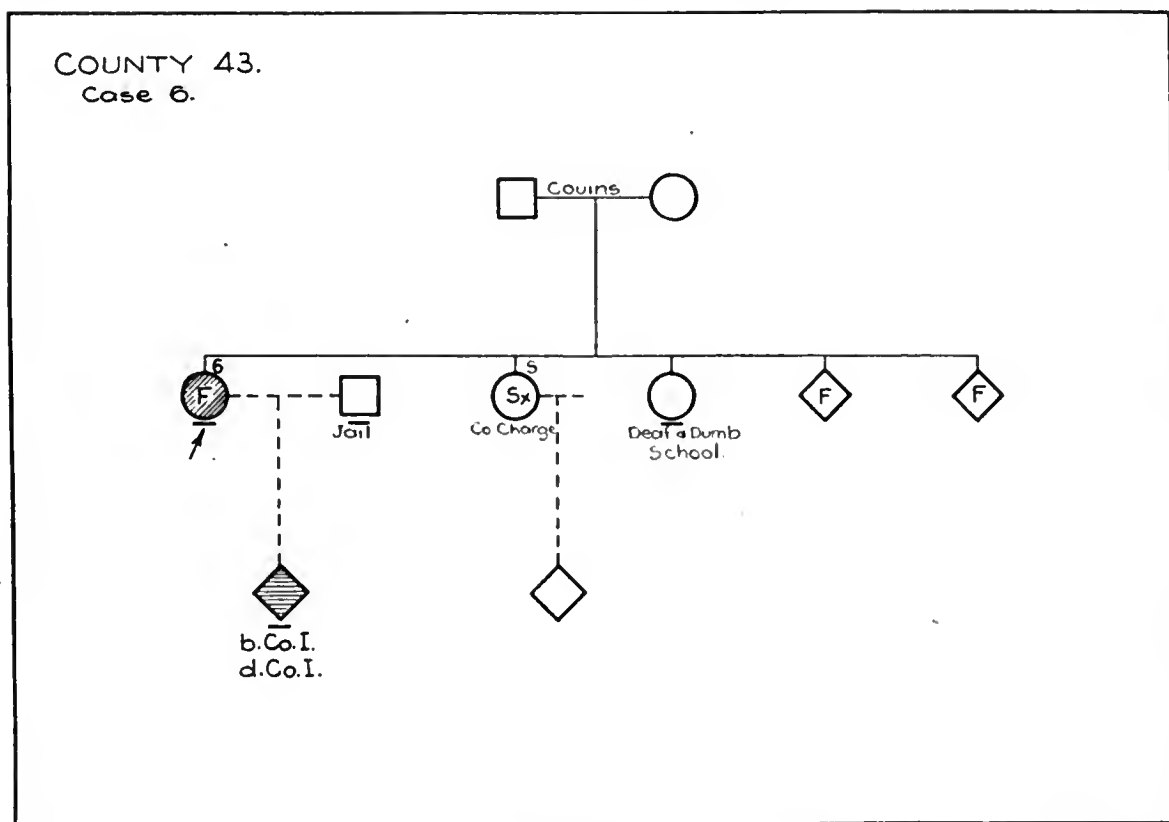


CHART 13.

This feeble-minded girl has one sister who was sexually immoral and died of syphilis, another sister who has been in the School for the Deaf and Dumb at Flint, while the two youngest of her fraternity are feeble-minded. (For explanation of the symbols used in the above chart see first chart in Appendix.)

*his property to her.* But Maggie is a pressing problem, especially when we look back a little into her family history.

All we know of her paternal heritage is a tendency to promiscuity and alcoholism. Her mother is feeble-minded, irresponsible sexually in her earlier years if not at present. Her three illegitimate children by different fathers bear witness to this fact. And of her four children by the degenerate husband she is now living with, one is dead, and two at least are feeble-minded. Facts of her fraternity are not easily ascertainable. She has one brother who is a bad drinker, one a barber and "bright" (Maggie says), one feeble-minded and two sisters who died. One of these sisters fell in the well and drowned, although she was eighteen years old, "but then she didn't know anything."

*Have Maggie and her strain justified her philosophy of "naturalness?"*  
How long are we to aid such unions? How long are we to allow them

to take place? How long are we going to leave the feeble-minded women of child-bearing age at large in the community, or only ineffectually segregated?

It has previously been stated that there were in the County Infirmaries of Michigan 137 of this class of feeble-minded women. These residents at the infirmaries are not effectively segregated. The separation of the sexes is often not strict, nor are the women always prevented from cohabiting with men outside of the institution. Nor is the segregation permanent. The feeble-minded inmates come and go. Of the 328 women

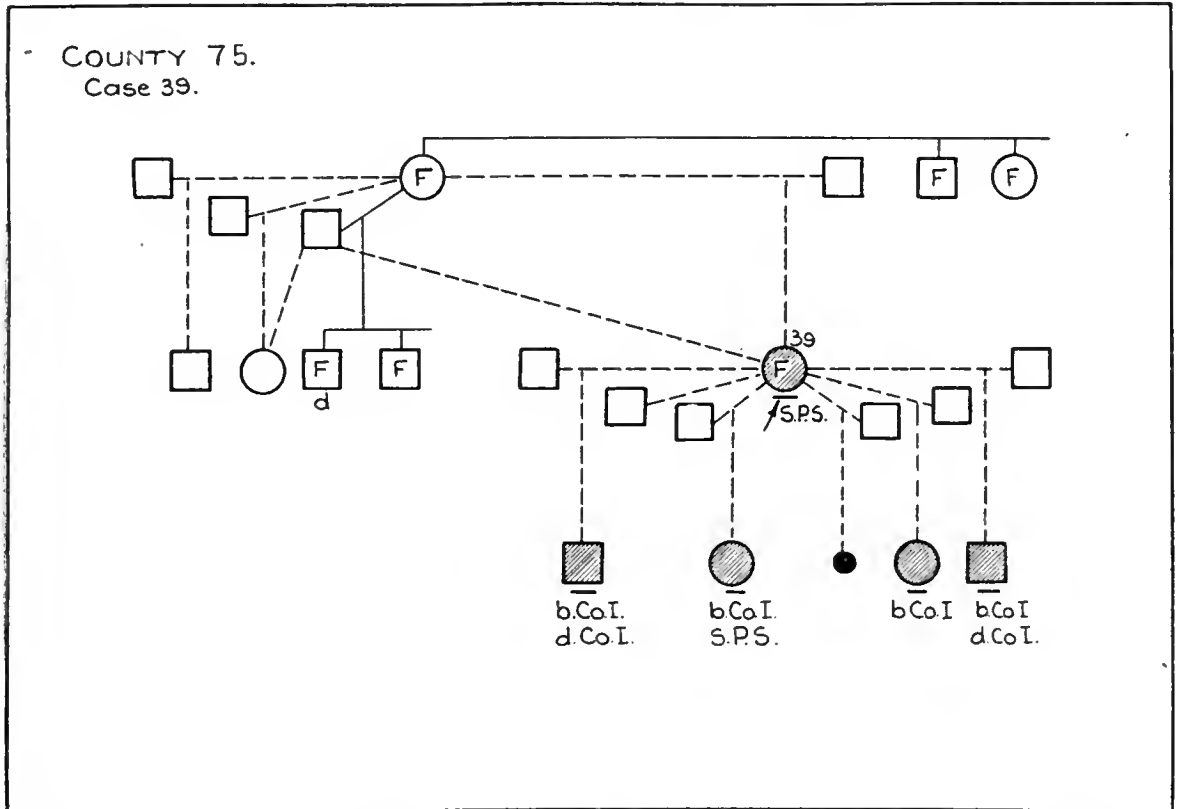


CHART 23.

For story of persons represented in this chart see page 99.

The central figure is that of Maggie (39), the illegitimate child of a feeble-minded mother, who, herself, has had four illegitimate children born in the County Infirmary. (For explanation of the symbols used in the above chart see first chart in Appendix.)

in the Feeble-minded Group in the infirmaries, 117 had had one previous admission, 40 had had two, 13 three, 19 four, 10 five, and 26 over five previous admissions.

It has been shown in this report by the text and charts that the feeble-minded problem is quite distinctly a state problem. It has been stated that nearly one-half (45%) of all the feeble-minded in the County Infirmaries were born in Michigan, while of these 60 per cent were born in the county which is now supporting them. We see that the state, even that each county, is very largely breeding its own feeble-minded individuals.

Until the state and local authorities realize the extent of the burden they are incurring, and squarely face the situation, we shall continue allowing the defective to beget defective and we shall continue to sup-



port their offspring. Few people realize how disproportionately much the Feeble-minded Group in our County Infirmaries are costing us.

Each one of the 1,974 individuals in the Normal Group had been a resident at the County Infirmary on an average of 3.23 years, while the average residence of each of the 710 feeble-minded individuals was 9.32 years. The actual average cost in monies expended in current expenses for each of the normal individuals was \$552.72. The average cost for each of the feeble-minded individuals was \$1,419.11. The 710 feeble-minded, who were in the County Infirmaries of the State of Michigan at

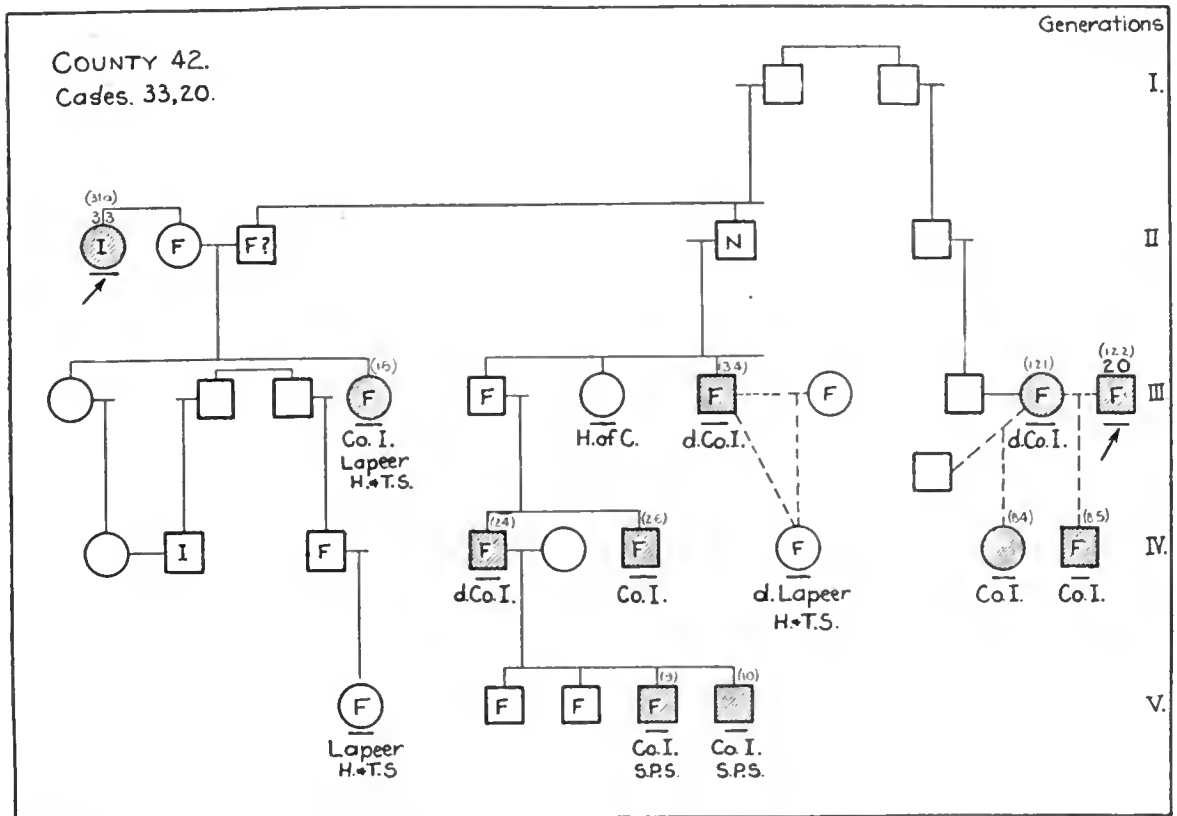


CHART 12.

This chart shows two individuals (20, 33) who were interviewed in the County Infirmary. However, the maintenance in the County Infirmary of all the members of this family has approximated \$17,573.97. This is exclusive of the cost to the State of members who have been in other Institutions.\* (For explanation of the symbols used in the above chart see first chart in the Appendix.)

\*NOTE: This is part of a chart appearing in the Report to the State Board of Health, but is presented here with more complete data in regard to the county.

the time these infirmaries were visited by this Commission's investigators have already, simply in their expenses as residents in the County Infirmaries, cost the public over one million dollars. (See Table 56.) Moreover, Chart 12 shows a family which has cost the state, for maintenance in its County Infirmaries alone, over \$17,500.00. (See Table 57.)

### Summary and Conclusions.

In Michigan, as elsewhere, it has been found that juvenile delinquency and feeble-mindedness are closely inter-related.

As a result of a very conservative judgment of a series of mental tests it has been found that one-fourth of the boys in the Lansing Industrial School, and one-third of the girls in the Adrian Industrial

Home are clearly feeble-minded. At least one-tenth more of the boys and one-third more of the girls are so markedly subnormal as to leave grave doubt of their ever attaining a sufficient mental development to enable them to cope successfully with the ordinary conditions of life.

Further: A careful study of the occupational histories of the juvenile delinquents resulted in showing that those with defective mentality had proven less reliable and had been found less frequently in positions requiring capacity.

The histories of the feeble-minded delinquents, and especially of the feeble-minded delinquent girls, have shown them to be more sexually irresponsible than were the normal delinquents.

The school histories of the juvenile delinquents have shown that the feeble-minded were more irregular in school attendance and less proficient in their school work than were the normals.

We have, then, in our two reformatories for juvenile delinquents, a large percentage of individuals who, because of inherent mental retardation, are incapable of reformation. The presence of this large group means a clogging of the machinery of reformation. The mere problem of the control and discipline of this class is so excessive as to supersede the problem of reformation.

Educational authorities agree that the presence of backward and defective children in a school group retards the progress of the normal children in that group. Yet, in the school work which our juvenile reformatories are endeavoring to continue for the children in their charge, we find that they are forced to deal with a group in which from one-third to three-fourths are feeble-minded or subnormal.

So long as we allow these conditions to exist, so long as we permit the feeble-minded delinquents to be treated in the same institutions with the normal delinquents, just so long shall we find that:

The success of the educational work in these institutions will be lessened;

The possibility of reformation will be lessened;

The results of the reformatory treatment of the feeble-minded delinquents will be nil, while,

The chances for final reinstatement of the normal delinquents as capable, law-abiding members of society are immeasurably decreased.

In Michigan, as elsewhere, it has been found that dependency and mental defectiveness are closely inter-related.

In the County Infirmaries of this state one-fourth of all the inmates have been found to be either feeble-minded or epileptic, two-fifths were either insane or mentally defective.

It has been found that each of the feeble-minded individuals has been maintained at public expense in the County Infirmaries for a period three times as long as has each normal individual.

It has been found that the feeble-minded women, both married and unmarried, at present resident in our County Infirmaries, have added large numbers to our dependent defective class.

It has been found that the children of these women have been cared for, not only in the County Infirmaries at county expense, but that they

have also been cared for in various state institutions at the expense of the state as a whole.

It has been found that there are in our County Infirmaries 137 feeble-minded women of child-bearing age who are neither effectively nor permanently segregated. That there are at least 133 feeble-minded girls at the Adrian Industrial Home, who, on reaching the age of 21 can no longer be retained, but will be discharged into the community at large, potential mothers of feeble-minded children. That there are on the waiting list of the Lapeer Home and Training School 50 feeble-minded women of child-bearing age, who are not segregated in any public institution.

While this Commission, because of the limits of time has been unable to determine the number of feeble-minded living at large in the community, yet it is confident that this number is large. One of the Commission's investigators found, in one family, living in a rural community, five feeble-minded women of child-bearing age.

Until we make adequate provision for the care of the feeble-minded, especially of the feeble-minded women of child-bearing age, we are going to continue producing feeble-minded children.

And this continued production means not only an increase of the number of defectives to be supported at public expense. It means, also, the increase of an unsocial class, an increase in crime and in sexual immorality.

## RECOMMENDATIONS.

In view of the facts shown in this report, the Commission makes the following recommendations:

1. In view of the excessive amount which the foreign population, in proportion to its numbers in Michigan, contributes to the insane and mentally defective class, it is urged that a more effective control and supervision be maintained by State and Federal authorities over foreign immigration.

2. In view of the fact that matters relating to the insane and mentally defective are essentially problems of the state as a whole, rather than the individual counties, it is desirable that the state maintain a more centralized control and supervision of all institutions having custody and treatment of the insane and those mentally defective or epileptic.

3. In view of the large and increasing number of discharged patients from hospitals for the insane which are continuing to live in unrecovered mental state outside of institutional care and in view of the absence of any contact between state institutions and the families of the insane and mentally defective, this Commission recommends the enactment of a law providing for the employment of a field worker by each institution and the continuance, by the institution, of a systematic supervision over those who have been discharged.

4. In view of the certain knowledge we possess, of the influence of syphilis in the production of insanity and physical and nervous de-

generacy, it is urged that continued efforts be made towards bringing to public attention the dangers from this disease.

5. In view of the known influence which alcohol has in the production of insanity, and conditions of physical and nervous degeneracy, it is urged that the public be educated to an appreciation of the dangers of intoxicating drinks.

6. It is recommended that a law be enacted providing that no child be admitted to any of the state institutions caring for juvenile delinquents or dependents, without a mental examination being made by a competent person, and that provision be made for the employment at each of these institutions of a person specially trained for this purpose.

7. In view of the lack of any centralized statistical consideration of matters pertaining to the insane and mentally defective classes, the Commission recommends the enactment of a law requiring all institutions caring for these classes to furnish the State Board of Health such information as the Board may require concerning these classes and their relation to public health; that the State Board of Health continue the statistical investigations carried on by this Commission and that ample provision be made for this work and that the statistics be published by the State Board of Health in its Annual Report.

8. In view of the continued menace to the public health from the increase of the feeble-minded and insane which is the result of the marriage of those who are insane or feeble-minded or physically diseased, it is recommended that a law be enacted making it obligatory that the name of each individual who may be cared for in a public or private institution in Michigan in which are treated or held in custody those who are insane, delinquent, dependent, mentally defective or epileptic, be filed in the office of the State Board of Health by the Superintendent or officer in charge of such public or private institutions. Such names shall be held in privacy. Before the clerk of any county in Michigan may issue a license for marriage, he shall submit the name of the applicant to the Secretary of the State Board of Health. If any information is in the official possession of the State Board of Health which shows that such individual has been adjudged insane or shown to be feeble-minded, epileptic or afflicted either with active or latent syphilis or gonorrhea, the clerk shall be so informed and the license shall not be issued.

9. In view of the following facts,

First. That the laws prohibiting marriages of defectives are not enforced;

Second, That the sterilization act is infrequently used;

Third, That the expense of segregation may be decreased by its application to but one sex;

Fourth, That the feeble-minded women play a more definite and tangible part in the problem of defectiveness than do the feeble-minded men;

And in view of the facts that

First, There are at least 137 feeble-minded women of child-bearing age in County Infirmaries who are neither effectively nor permanently segregated;

Second, There are at least 131 feeble-minded girls at the Adrian Industrial Home who are neither subjects for reformatory treatment nor desirable as mothers after their discharge;

Third, There were, June 30, 1914, 50 feeble-minded women of child-bearing age on the waiting list of the Lapeer Home and Training School, whose full capacity is already reached;

We recommend that some adequate state provisions be made, either in the establishment of a special institution or by increasing the capacity of the Lapeer Home and Training School, for the custody of the feeble-minded women of child-bearing age.





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## APPENDIX.

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# LEGEND

	Male		Inmate Interviewed.
	Female		Residence in County Infirmary
	Sex Unknown	Co.I.	County Infirmary
	Miscarriage.	S.P.S.	State Public School
F	Feebleminded	Lapeer H.T.S.	Lapeer Home-Training School.
I	Insane	K.S.H.	Kalamazoo State Hospital.
Ne	Neurotic	P.S.H.	Pontiac " "
E	Epileptic	T.S.H.	Traverse " "
X	x mentality	N.S.H.	Newberry " "
S,	Sexually Immoral	I.S.P.	Ionia State Prison.
Ch.	Chorea	H.of.C.	Detroit House of Correction.
Sui.	Suicide	—	In a Public Institution.

In the above plate are given the symbols used in Charts 1-28 which are distributed throughout the body of the text. Beside this explanation of symbols, the following explanation will help to an understanding of the charts.

The symbols used are explained in the accompanying legend. Short horizontal or oblique lines connecting two symbols denote a marriage. The long horizontal lines suspend symbols representing the children in one family. The dotted lines indicate non-conjugal relationships with their illegitimate offspring, if there are such.

It must be stated that all these charts are incomplete, representing only those individuals in a family about whom sufficient information was obtained to justify their classification as feebleminded, insane, etcetera. This information, except in rare cases, was not obtained by field work, but by careful questioning of the County Infirmary keepers, inmates and occasionally persons outside the institution. These incomplete charts are, therefore, only intended to indicate the possible ramifications of defectiveness and dependency and a field wherein further investigation would prove exceedingly profitable.



## APPENDIX.

TABLE 1.—*Insane in Institutions in Michigan, June 30, 1914.*

Public Institutions.	Males.	Females.	Totals.
Kalamazoo State Hospital.....	1,100	1,011	2,111
Pontiac State Hospital.....	724	688	1,412
Traverse City State Hospital.....	861	656	1,517
Newberry State Hospital.....	520	370	890
Psychopathic State Hospital.....	24	31	55
Ionia State Hospital.....	396	59	455
Eloise State Hospital.....	291	299	590
Total.....	3,916	3,114	7,030
County Infirmaries.....	249	158	407
Private Institutions.			
Dearborn Retreat.....	69	131	200
Oak Grove.....	17	25	*42
Society for Christian Benevolence for Insane and Imbeciles.....	11	13	24
Total.....	97	169	266
Total insane in public and private institutions.....	4,262	3,441	7,703

\*Including private patients from other states.

TABLE 2.—(Diagram I.) — *Relation of increase in first and total admissions in Michigan State Hospitals to increase in total population of State, 1901 to 1914.*

Year.	First admission.	Total admissions	Population.
1901.....	793	1,115	2,459,901
1902.....	915	1,270	2,498,820
1903.....	1,126	1,514	2,537,739
1904.....	1,002	1,196	2,576,658
1905.....	1,051	1,567	2,615,577
1906.....	1,073	1,642	2,654,496
1907.....	1,005	1,597	2,693,415
1908.....	1,099	1,646	2,732,334
1909.....	1,177	1,729	2,771,254
1910.....	1,200	1,682	2,810,173
1911.....	1,206	1,674	2,849,092
1912.....	1,196	1,560	2,888,011
1913.....	1,199	1,613	2,926,930
1914.....	1,290	1,603	2,965,849

TABLE 3.—(Diagram II.)—*Total number and ratio per 10,000 receiving treatment at Michigan State Hospitals during each biennial period 1890 to 1914.*

Year.	Number.	Ratio per 10,000.
1890.....	3,652	17.44
1892.....	3,989	18.47
1894.....	4,247	19.09
1896.....	4,709	20.56
1898.....	4,868	20.66
1900.....	4,995	20.63
1902.....	5,519	22.08
1904.....	6,203	24.07
1906.....	6,695	25.22
1908.....	7,336	26.84
1910.....	8,027	28.56
1912.....	8,483	29.34
1914.....	8,955	30.19

TABLE 4.—*Nativity of patients admitted to the Michigan State Hospitals for the Insane, during the year ending August 31, 1914.*

	Males.	Females.	Totals.
Place of birth unknown.....	21	18	39
Austria.....	14	7	21
Belgium.....	2	2	4
Canada.....	69	70	139
Denmark.....	1	1	2
England—Wales.....	21	14	35
Finland.....	27	16	43
France.....	3	0	3
Germany—Prussia.....	52	40	92
Holland.....	14	11	25
Hungary.....	4	3	7
Ireland.....	14	11	25
Italy.....	8	0	8
Norway.....	3	4	7
Russian Poland.....	28	13	41
Russia.....	17	15	32
Scotland.....	7	5	12
Sweden.....	14	7	21
Switzerland.....	3	1	4
Other Countries.....	11	3	14
Total foreign born.....	312	223	535
Total native born.....	689	510	1,199
Michigan.....	441	330	771
Indiana.....	18	16	34
New York.....	75	51	126
Ohio.....	50	42	92
Pennsylvania.....	19	11	30
New Jersey.....	0	2	2
New England.....	12	6	18
Southern.....	8	8	16
Western.....	35	33	68
State unknown.....	31	11	42

TABLE 5.—(Diagram IV.)—*Number per 10,000 of the patients of different nativities admitted to Michigan State Hospitals, Sept. 1, 1913, to August 31, 1914.*

Austria.....	6.7
Belgium.....	7.0
Canada.....	8.1
Denmark.....	3.1
England—Wales.....	8.0
Finland.....	13.7
France.....	12.4
Germany.....	6.9
Holland.....	7.5
Hungary.....	6.0
Ireland.....	12.2
Italy.....	4.7
Norway.....	9.1
Russia and Poland.....	19.2
Scotland.....	12.0
Sweden.....	7.9
Switzerland.....	14.3
Total foreign born.....	8.9
Native born.....	5.4

TABLE 6.—*Nativity of parents of patients admitted to the Michigan State Hospitals for the Insane, during the year ending August 31, 1914.*

	Males.	Females.	Total.
Place of birth unknown.....	205	147	352
Austria.....	26	25	51
Belgium.....	4	6	10
Canada.....	160	146	306
Denmark.....	6	6	12
England—Wales.....	87	107	194
Finland.....	45	46	91
France.....	9	9	18
Germany—Prussia.....	202	222	424
Holland.....	39	42	81
Hungary.....	9	8	17
Ireland.....	87	99	186
Italy.....	7	7	14
Norway.....	9	10	19
Russian Poland.....	45	47	92
Russia.....	30	31	61
Scotland.....	37	52	89
Sweden.....	36	36	72
Switzerland.....	5	8	13
Other Countries.....	12	16	28
Total foreign born.....	855	923	1,778
Total native born.....	713	703	1,416
Michigan.....	217	173	390
Indiana.....	27	20	47
New York.....	173	219	392
Ohio.....	98	80	178
Pennsylvania.....	50	48	98
New Jersey.....	10	11	21
New England States.....	41	47	88
Southern States.....	13	22	35
Western States.....	24	19	43
State unknown.....	60	64	124

TABLE 7.—*Summary of nativity of parents of patients.*

Both parents foreign born.....	783
One parent foreign born.....	214
Both parents native born.....	590
One parent native, one unknown.....	49
Both parents unknown.....	137
<hr/>	
Total.....	1,773

TABLE 8.—(Map 1.)—*Average yearly number of admissions to Michigan State Hospitals by county, for the ten year period ending June 30, 1912.*

County.	1*	2†
Alcona.....	4.5	7.8
Alger.....	5.0	7.3
Allegan.....	29.5	7.5
Alpena.....	7.4	3.8
Antrim.....	8.0	4.9
Arenac.....	2.7	2.7
Baraga.....	2.9	5.5
Barry.....	13.0	5.7
Bay.....	17.6	2.6
Benzie.....	6.8	6.6
Berrien.....	25.3	4.9
Branch.....	15.8	5.9
Calhoun.....	40.6	7.6
Cass.....	9.8	4.7
Charlevoix.....	11.9	7.2
Cheboygan.....	11.9	7.1
Chippewa.....	17.5	7.6
Clare.....	3.3	3.7
Clinton.....	9.0	3.7
Crawford.....	2.3	6.6
Delta.....	18.1	6.7
Dickinson.....	9.0	4.6
Eaton.....	19.2	6.1
Emmet.....	12.8	7.4
Genesee.....	22.4	4.2
Gladwin.....	2.0	2.6
Gogebie.....	7.7	3.8
Grand Traverse.....	18.4	8.3
Gratiot.....	16.8	5.7
Hillsdale.....	18.5	6.3
Houghton.....	50.5	6.5
Huron.....	11.6	3.3
Ingham.....	25.5	5.4
Ionia.....	16.4	4.8
Iosco.....	3.0	3.0
Iron.....	6.7	5.5
Isabella.....	8.6	3.7
Jackson.....	30.2	5.9
Kalamazoo.....	51.7	9.8
Kalkaska.....	3.1	4.0
Kent.....	88.3	6.1
Keweenaw.....	2.7	5.3
Lake.....	2.1	4.2
Lapeer.....	12.0	4.4

\*Average number of admissions per year for the ten year period ending June 30, 1912.

†Rate per 10,000 of population.

TABLE 8.—*Concluded.*

County.	1*	2†
Leelanau.....	5.9	5.6
Lenawee.....	17.1	3.5
Livingston.....	7.2	3.8
Luce.....	5.5	15.7
Mackinac.....	6.9	8.1
Macomb.....	11.2	3.4
Manistee.....	13.8	5.1
Marquette.....	29.4	6.7
Mason.....	9.8	4.8
Mecosta.....	9.7	4.8
Menominee.....	15.5	5.8
Midland.....	6.9	4.8
Missaukee.....	4.1	4.1
Monroe.....	12.2	3.7
Montcalm.....	14.9	4.5
Montmorency.....	.9	2.5
Muskegon.....	18.5	4.7
Newaygo.....	5.7	2.7
Oakland.....	39.7	8.4
Oceana.....	10.1	5.7
Ogemaw.....	2.4	2.8
Ontonagon.....	7.3	9.9
Osceola.....	8.3	4.6
Oscoda.....	.9	5.1
Otsego.....	2.6	4.0
Ottawa.....	22.7	5.3
Presque Isle.....	2.6	2.5
Roscommon.....	1.0	4.9
Saginaw.....	38.6	4.5
Sanilac.....	11.5	3.3
Schoolcraft.....	7.7	9.2
Shiawassee.....	15.0	4.4
St. Clair.....	21.6	4.0
St. Joseph.....	14.3	5.7
Tuscola.....	11.1	3.1
Van Buren.....	25.1	7.5
Washtenaw.....	32.1	6.9
Wayne.....	218.8	4.9
Wexford.....	10.3	5.4

\*Average number of admissions per year for the ten year period ending June 30, 1912.

†Rate per 10,000 of population.

TABLE 9.—*Place of residence before admission to Michigan State Hospitals. Admissions for year ending August 31, 1914.*

Group of insanity.	Grand Rapids, Detroit.	From cities of—								Total.
		24,000-51,000.	10,000-18,000.	5,000-9,999.	2,000-4,999.	1,000-1,999.	Less than 1,000.	Rural.	Unknown.	
Manic depressive.....	79	54	20	28	32	32	83	57	11	396
Psycho-neurotic.....	24	11	8	9	5	11	13	2	1	84
Paranoid.....	25	5	11	6	4	6	10	6	2	75
Dementia praecox.....	46	30	25	16	25	14	34	22	8	220
Cerebro-syphilis.....	96	42	19	11	17	11	18	7	8	229
Alcoholic.....	57	19	24	2	11	12	14	5	6	150
Drug.....	8	8	4	1	3	2	1	2	1	30
Senile dementia.....	36	37	20	18	23	27	43	34	11	249
Organic.....	5	3	.....	2	5	4	4	7	.....	30
Infection, exhaustion and other physical.....	12	6	6	4	2	5	4	7	.....	46
Defective.....	11	13	10	3	6	9	15	8	2	77
Epileptic.....	15	14	4	7	6	12	10	16	5	89
Unclassified.....	29	11	4	2	3	4	10	12	2	77
Not insane.....	7	5	1	1	1	1	2	2	1	21
Total.....	450	258	156	110	143	150	261	187	58	1,773

TABLE 10.—(Diagram VII.)—*Sex in relation to certain forms of insanity. Admissions to Michigan State Hospitals July 1, 1906, to June 30, 1912, and September 1, 1913, to August 31, 1914.*

	Males.	Females.	Totals.
Manic depressive.....	851	1,178	2,029
Dementia praecox.....	925	620	1,545
Cerebral syphilis.....	766	194	960
Senile dementia.....	561	349	910
Alcohol and drug.....	589	90	679

TABLE 11.—(Diagram VI.)—*Place of residence before admission to Michigan State Hospitals, given by percentages for the principal forms of insanity. Based on admissions for the year ending August 31, 1914.*

Forms of insanity.	Cities over 100,000.	10,000- 50,000.	5,000- 10,000.	2,000- 5,000.	Less than 2,000.	Residence unknown.
	%	%	%	%	%	%
Cerebral syphilis.....	41.9	26.6	4.8	7.4	15.7	3.5
Alcohol and drug.....	36.11	30.55	1.67	7.78	19.99	3.89
Dementia praecox.....	20.9	25.00	7.3	11.4	31.8	3.7
Epileptic and defective.....	15.66	24.70	6.02	7.23	42.17	4.21
Manic depressive.....	20.00	18.7	7.0	8.1	43.5	2.8
Senile dementia.....	14.5	23.0	6.9	9.3	41.9	4.4



TABLE 13.—(Diagram IX.)—*Extent of use of alcohol by male patients admitted to Michigan State Hospitals Sept. 1, 1913 to August 31, 1914.*

	Per cent.
Occasional moderate use of alcohol.....	23.8
Steady moderate use of alcohol.....	7.0
Occasional excessive use of alcohol.....	9.7
Steady excessive use of alcohol.....	18.3
Steady moderate and occasional excessive use of alcohol.....	3.2
No use of alcohol.....	25.7
Facts unknown.....	12.2
	99.9

TABLE 14.—*Results of Wassermann tests on patients admitted to Michigan State Hospitals, September 1, 1913, to August 31, 1914.*

Number of individuals whose Wassermann reaction was—	Males.	Females.	Totals.
Positive.....	203	77	280
Questionable.....	34	39	73
Negative.....	703	490	1,193
Unobtained.....	82	145	227
Total.....	1,022	751	1,773



TABLE 15.—Ages of patients admitted to Michigan State Hospitals. 1890-1912.

	1892						1894						1896						1898						1900						1902						1904														
	M.			F.			T.			M.			F.			T.			M.			F.			T.			M.			F.			T.			M.			F.			T.								
	%			%			%			%			%			%			%			%			%			%			%			%			%			%			%								
Below 15.....	3	6	9	414	972	670	1	4	5	4	7	11	3	3	6	2	7	9	5	3	8	10	3	13	37	33	30	37	46	24	70	43	31	31	60	25	28	53	35	42	77	49	36	85							
15-19.....	84	47	131	11.60	5.350	9.770	92	65	157	91	62	153	70	51	121	68	45	113	65	70	135	121	95	216	84	47	131	11.60	5.350	9.770	92	65	157	91	62	153	70	51	121	68	45	113	65	70	135	121	95	216			
20-24.....	93	82	175	12.84	13.29	13.05	81	99	180	111	80	191	88	81	169	91	74	165	96	81	177	121	95	216	93	82	175	12.84	13.29	13.05	81	99	180	111	80	191	88	81	169	91	74	165	96	81	177	121	95	216			
25-29.....	88	83	171	12.15	13.45	12.75	81	84	165	96	103	199	91	81	172	92	63	155	97	79	176	100	109	209	88	83	171	12.15	13.45	12.75	81	84	165	96	103	199	91	81	172	92	63	155	97	79	176	100	109	209			
30-34.....	79	83	162	10.91	13.45	12.08	91	83	184	127	114	241	100	109	209	76	65	141	95	95	190	135	93	228	79	83	162	10.91	13.45	12.08	91	83	184	127	114	241	100	109	209	76	65	141	95	95	190	135	93	228			
35-39.....	69	49	118	9.53	7.94	8.80	87	69	156	85	84	169	101	99	200	93	87	180	98	73	171	103	103	206	68	72	140	9.39	11.70	10.44	71	70	141	82	74	156	57	65	122	79	76	155	97	116	213						
40-44.....	68	72	140	9.39	11.70	10.44	71	70	141	82	74	156	76	74	150	57	65	122	79	76	155	97	116	213	87	73	160	12.01	11.83	11.93	119	97	216	98	100	198	112	88	200	95	90	185	122	94	216	189	104	293			
*50-59.....	51	53	104	7.04	8.59	7.76	78	39	117	71	59	130	67	53	120	70	51	121	80	61	141	105	69	174	51	53	104	7.04	8.59	7.76	78	39	117	71	59	130	67	53	120	70	51	121	80	61	141	105	69	174			
*60-69.....	39	27	66	5.39	4.38	4.92	47	29	76	48	24	72	39	33	72	54	36	90	78	52	130	96	67	163	39	27	66	5.39	4.38	4.92	47	29	76	48	24	72	39	33	72	54	36	90	78	52	130	96	67	163			
70 and up.....	26	9	35	3.59	1.46	2.61	26	10	36	8	7	15	15	19	34	45	15	60	44	34	78	56	30	86	26	9	35	3.59	1.46	2.61	26	10	36	8	7	15	15	19	34	45	15	60	44	34	78	56	30	86			
Unascertained.....	724	617	1,341	99.97	100.03	100.0	820	683	1,503	864	745	1,609	791	722	1,513	768	626	1,394	894	760	1,654	1,154	900	2,054	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....	Total.....
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\* Ages 50 and over are tabulated in decade periods.

TABLE 16.—*Showing occupation in relation to 2,991 admissions to Michigan State Hospitals for the Insane.*

	Total.		
	Males.	Females.	Totals.
Professional.....	72	69	141
Clerical and official.....	79	37	116
Mercantile and trading.....	102	27	129
Public entertainment.....	25	4	29
Personal service, police and military.....	29	42	71
Laborer and servant.....	392	129	521
Manufacturing and mechanical industry.....	224	51	275
Agricultural, transportation, other outdoor.....	591	155	746
Home housekeeping.....	0	523	523
None.....	81	227	308
Unascertained.....	67	65	132
Total.....	1,662	1,329	2,991



TABLE 18.—(*Diagram III.*)**DISCHARGED CASES:**

An investigation was made of the fate of 983 cases who were discharged from the four State Hospitals during the biennial period ending June 30, 1904.

Satisfactory information was obtained concerning 329 males and 338 females, a total of 667 cases.

**CONDITION WHEN DISCHARGED:**

219 or 32.8% recovered.  
350 or 52.5% improved.  
80 or 12.1% unimproved.  
18 or 2.7% with no data.

**PREVIOUS ADMISSIONS:**

A total of 134 cases or 20% had had previous admissions to the hospital from which they were discharged:

85 with 1 previous admission,  
28 with 2 previous admissions,  
11 with 3 previous admissions,  
4 with 4 previous admissions,  
3 with 5 previous admissions,  
3 with 6 previous admissions.

A total of 45 cases had had previous admissions to some other public or private hospital.

39 with 1 previous admission,  
5 with 2 previous admissions,  
1 with 3 previous admissions.

**DURATIONS OF PRESENT ADMISSIONS:**

113 with 9 weeks or under.  
231 with 10 to 24 weeks.  
162 with 25 to 49 weeks.  
54 with 50 to 74 weeks.  
29 with 75 to 99 weeks.  
26 with 100 to 149 weeks.  
15 with 150 to 199 weeks.  
12 with 200 to 299 weeks.  
16 with 300 to 399 weeks.  
6 with 400 to 499 weeks.  
1 with 700 weeks.  
1 with 800 weeks.  
1 with 900 weeks.

**READMISSIONS:**

There was a total of 317 individuals or 47.5% who were readmitted to the hospital from which they were discharged in the period 1902 to 1904. Of these:

224 had 1 readmission,  
66 had 2 readmissions,  
15 had 3 readmissions,  
10 had 4 readmissions,  
1 had 5 readmissions,  
1 had 12 readmissions.

The periods between the discharges of the 317 cases and their first subsequent admissions have been as follows:

27 with 9 weeks or under,  
20 with 10 to 24 weeks,  
46 with 25 to 49 weeks,  
42 with 50 to 74 weeks,  
18 with 75 to 99 weeks.  
38 with 100 to 149 weeks,  
33 with 150 to 199 weeks,  
45 with 200 to 299 weeks,  
24 with 300 to 399 weeks,  
14 with 400 to 499 weeks,  
7 with 500 to 599 weeks,  
1 with 600 to 699 weeks.  
2 with unknown duration.

**SUBSEQUENT ATTACKS:**

There was a total of 56 individuals or 8.4% of the whole number under consideration who had had subsequent attacks of their mental troubles, which were not taken care of by the state institutions.

22 individuals had 1 subsequent attack.  
2 individuals had 2 subsequent attacks.  
3 individuals had 3 subsequent attacks.  
29 individuals had an undetermined number of attacks. Of these, there were:

9 taken care of in some other institution,  
37 were taken care of in the home, 4 of whom were also taken to another institution either during a part of the attack or during another attack.

TABLE 18.—*Concluded.*

## PRESENT CONDITION:

Of the total 667 cases it was found that 391 or 58.6% are living now; 185 or 27.7% have died. In 91 cases or 13.6% we were unable to ascertain whether they were living or dead, however, there were some facts in regard either to previous or subsequent admissions.

## OF THOSE LIVING:

There are 129 or 32.9% who are living in the state institutions from which they were discharged—10 who are living in some other institution.

2 whose place of residence was uncertain.

250 or 63.9% who are living outside of institutions.

Of the total 262 individuals who are not living in the state institutions, it was found that 60 or 22.9% are not normal. These included 27 who are definitely insane, 20 aberrated, about whom the information was not sufficiently definite to call insane, but did point to a condition at present which could not be called normal—and 13 who were diagnosed as defective. Of this same 262 individuals not back in the institution about 25 or 9.5% the information gathered was not sufficient to enable us to make a judgment in regard to their mental condition. However, we do know that of these 25 cases of questionable mental condition, 9 or 36% had had readmissions.

6 had had 1 readmission,  
2 had had 2 readmissions,  
1 had had 4 readmissions,

and 2 of the number had had subsequent attacks, which were not cared for in the state institution. Of this total 262, who are not living in the state institution, 177 or 67.5% are normal at present, in so far as could be judged from the correspondence in regard to them. Of these 177 normal patients out,

85 or 48% were discharged recovered,  
84 or 47.4% were discharged improved,  
8 or 4.5% were discharged unimproved.

However, 38 or 21.4% of these normals had had subsequent admissions to the institution:

27 with 1 readmission,  
9 with 2 readmissions,  
1 with 3 readmissions,  
1 with 4 readmissions,

and 25 of these normals had had subsequent attacks not cared for by the institution.

## THOSE DEAD:

Of the total number of 667 cases, 185 or 27.7% have died in the 10 year period subsequent to their discharge from the institution, in the period between 1902 and 1904. Of this number 63 or 34% died during a subsequent admission to the State Hospital. Nine cases died in some other institution; 37 died, but the place of their death was not ascertained, while 76 or 41% died at home.

Of the 122 who did not die in the state institution:

31 died insane,  
1 died aberrated,  
4 died defective,

making a total of 36 individuals or 29.5% of those dead who were not normal. In 67 or 54.9% of the 122 deaths it was impossible to determine the mental condition. However, it is known that 10 of this number had one subsequent admission to the State Hospital and 3 had subsequent attacks not cared for in the institution. Of the total number of 122 deaths outside the institution, 19 or 15.5% were normal at the time of death.

Of these 19 normal:

7 were discharged recovered,  
8 were discharged improved,  
4 were discharged unimproved,

And of this number two had had two subsequent admissions, one had had one subsequent attack not cared for in the institution.

The period of years intervening between the discharge of this normal group and their death varied as follows:

1 for whom the period was unknown,  
1 died within one week of discharge,  
2 died within one month of discharge,  
2 died within six months of discharge,  
1 died within three years of discharge,  
2 died within five years of discharge,  
10 died between 5 and 10 years after discharge.

There were 22 cases or 11.8% of the total who had died who had committed suicide. This number of 22 were discharged as follows:

2 unknown,  
6 discharged recovered,  
9 discharged improved,  
5 discharged unimproved.

TABLE 18.—*Continued.*

As was stated above in 91 or 13.6% of the cases it was impossible to determine their present condition. However, of this number a total of 44 or 48.3% had had admissions previous to the one terminated in the period under consideration, and 46 or 50.5% had had subsequent admissions.

29 with 1 subsequent admission,  
13 with 2 subsequent admissions,  
2 with 3 subsequent admissions,  
2 with 4 subsequent admissions.

And one had had one subsequent attack cared for outside the institution.

TABLE 19.—*Lansing Industrial School.*

## RESULTS OF BINET TESTS.

Chronological age of inmates.	Mental age of inmates.											Total
	15	15	14	13	12	11	10	9	8	7	6	
17.....			1	18	32	26	19	1				97
16.....	1		1	30	64	66	29	10	1	2		201
15.....	1			13	62	75	31	9	4			195
14.....				4	28	58	32	16	6	1		145
13.....					12	37	29	7	1			86
12.....					2	19	21	4	1			47
11.....					1	6	6	7	2		1	23
10.....						1	1	2				4
Total.....	2		2	65	201	288	168	56	15	3	1	801*

\*There were seven boys who could not be adequately tested, four because of difficulties in understanding or expressing themselves in English, one because of blindness, and one because of extreme deafness. There was one other boy testing 12, but whose chronological age was unknown.

TABLE 20.—*Adrian Industrial School.*  
RESULTS OF BINET TESTS.

Chronological age of inmates.	Mental age of inmates.											Total.
	14	13	12	11	10	9	8	7	6	5	4	
20.....							1					1
19.....	1	1	7	4	1	4						18
18.....		1	12	16	8	2	4					43
17.....		8	29	27	17	10	2	1				94
16.....		10	31	40	22	5	4	1		1		114
15.....		4	12	17	22	5	1					61
14.....			4	9	2	5	4				1	25
13.....			1	6	7	2	2	1				19
12.....			1	1	2	2	2					8
11.....						1		1				2
10.....					1							1
Total.....	1	24	97	120	82	36	20	4	0	1	1	386

*Note on Tables 19 and 20.*

The column at the left of the chart gives the chronological or physical age of the individual tested, while reading from left to right are given the mental ages to which they tested according to the Binet Test Scale. The column at the right of the chart gives the total number of inmates of any given age. Thus in Table 20 of the nineteen year old girls there was one who tested 14, one 13, seven 12, etc., while the total number of girls nineteen years old was 18.

The heavy black line separates the inmates into two groups. To the right of the line appear all cases classed as feeble-minded. (Adrian 131 or 34%; Lansing 171 or 21½%.) To the left of the line appear all cases classed as normal. (Adrian 254 or 66%; Lansing 630 or 78½%).

The basis on which this classification is made is the most conservative. Only those individuals whose mental age was four or more years less than their physical age were considered feeble-minded. Further than this all cases which tested eleven or over mentally, were classed as normal, even though they were four or more years retarded. This latter policy was considered as the only safe one—since the Binet Scale is quite generally considered inadequate for those individuals whose mental development is eleven or more years.

TABLE 21.—*Adrian and Lansing Industrial Schools.*  
SCHOOL RECORD.

Age on leaving.	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
8 years.....		1	1			
10 years.....	6	18	24	53	14	67
11 years.....	3	18	21	61	26	87
12 years.....	12	27	39	78	36	114
13 years.....	21	59	80	104	68	172
14 years.....	37	84	121	77	68	145
15 years.....	23	51	74	23	26	49
16 years.....	4	15	19	4	1	5
Unknown.....	2	5	7	96	74	170
Total.....	108	278	386	496	313	809
Grade on leaving.						
1st.....		7	7	13	28	41
2nd.....	1	11	12	27	31	58
3rd.....	1	27	28	54	72	126
4th.....	14	60	74	90	69	159
5th.....	8	67	75	108	48	156
6th.....	19	47	66	80	30	110
7th.....	26	38	64	60	10	70
8th.....	25	16	41	35	1	36
9th.....	12	3	15	7		7
10th.....	2		2	1		1
Ungraded room.....		1	1	3	2	5
Unknown.....		1	1	18	22	40
Total.....	108	278	386	496	313	809
Kind of attendance.						
Regular.....	50	87	137	97	25	122
Irregular.....	37	85	122	129	51	180
Very irregular.....	19	102	121	253	214	467
Total.....	106	274	380	479	290	769
Kind of school.						
Private.....		5	5	3		3
Public—city.....	67	153	220	208	104	312
Public—rural.....	11	47	58	14	26	40
Parochial.....	2	4	6	43	29	72
Public city—public rural.....	20	51	71	84	60	144
Public city—parochial.....	2	4	6	95	60	155
Private—public city.....	3	9	12	7	3	10
Public rural—parochial.....		1	1	5	1	6
Private—public rural.....				1		1
Unknown.....	3	4	7	36	30	66
Total.....	108	278	386	496	313	809
Number of individuals who had been in ungraded rooms.....		2	2	15	12	27



TABLE 22.—*Adrian and Lansing Industrial Schools.*

Physical facts.	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
<b>Teeth.</b>						
Irregular . . . . .	14	20	34	37	41	78
Widely spaced . . . . .	6	28	34	22	12	34
Poor . . . . .		15	15	38	24	62
Extra number . . . . .		4	4	14	3	17
Temporary teeth . . . . .	7	21	28	12	10	22
Exceptionally good . . . . .	19	20	39	38	21	59
<b>Tonsils or Adenoids.</b>						
Enlarged tonsils or adenoids present . . . . .	20	54	74	169	117	286
Tonsils or adenoids removed . . . . .	3	8	11	28	10	38
Suspected adenoids . . . . .	3	14	17	21	18	39
Mouth breathers . . . . .	2	11	13	33	52	85
<b>Ears.</b>						
Attached lobules . . . . .	9	15	26	50	33	83
Defective helix or antihelix . . . . .	13	42	55	66	48	114
Other form defect . . . . .	29	101	130	114	92	206
Defective hearing . . . . .		9	9	20	17	37
<b>Eyes.</b>						
Defective vision . . . . .	13	30	43	48	31	79
Defective vision with glasses . . . . .	1	3	4	10	4	14
Strabismus . . . . .	4	13	17	10	5	15
<b>Physical underdevelopment.</b>						
Slightly undersized . . . . .	10	40	50	64	54	118
Notably undersized . . . . .	6	24	30	77	51	128
Weak, anemic . . . . .	8	11	19	51	40	91

TABLE 23.—*Lansing Industrial School.*

## EMPLOYMENT HISTORY.

Kinds of work.	N.	F.	T.
Number of individuals who had been:			
Newsboys*.....	222	108	330
Bootblacks.....	29	17	46
Delivery boys.....	46	15	61
Clerks.....	25	7	32
Messengers.....	25	13	38
Employed in show places.....	21	10	31
Employed at odd jobs.....	309	151	460
Farm laborers.....	144	100	244
Office boys.....	16	2	18
Factory employees.....	78	41	119
Number of individuals who had no employment.....	3	2	5
Number of individuals about whom employment facts were unknown.....	7	6	13
Total.....	925	472	1,397
Number of individuals who had been employed in the following number of street trades:†			
One.....	194	96	290
Two.....	41	19	60
Three.....	3	2	5
Four.....	.....	1	1
Total.....	238	118	356
Number of different places worked in by each individual.	N.	F.	T.
One place.....	121	106	227
Two places.....	139	87	226
Three places.....	101	46	147
Four places.....	63	20	83
Five places.....	26	12	38
Six places.....	12	.....	12
Seven places.....	1	1	2
Eight places.....	3	.....	3
Total.....	466	272	738

\*Including those who either sold or delivered papers.

†In this group of trades have been included newspaper selling or delivering, shoe shining, messenger service, and any kind of employment at show places.

TABLE 24.—*Adrian Industrial School.*

## ADRIAN EMPLOYMENT HISTORY.

Kinds of work.	N.	F.	T.
Domestic.....	46	108	154
Dishwasher.....	5	17	22
Nurse girl.....	5	27	32
Chambermaid.....	4	.....	4
Waitress in hotel.....	5	22	27
Waitress in restaurant.....	7	10	17
Clerk in 5 and 10c store.....	4	6	10
Clerk in other stores.....	5	8	13
Telephone girl.....	5	4	9
Laundry employees.....	.....	8	8
Factory employees.....	20	50	70
Odd jobs.....	5	19	24
Total.....	111	279	390

Of the 386 girls, there was one stenographer, one Western Union employee, one canvasser, one prostitute, one dressmaker, one milliner, one office girl, one news collector, one vaudeville performer, one hairdresser, one milk wagon driver, and six cash girls. Total, 407.

Number of different places worked in by each individual.	N.	F.	T.
One place.....	19	29	48
Two places.....	17	30	47
Three places.....	13	39	52
Four places.....	6	31	37
Five places.....	1	11	12
Six places.....	6	10	16
Seven places.....	1	6	7
Nine places.....	2	1	3
Ten places.....	.....	1	1
Eleven places.....	.....	1	1
Total.....	65	159	224

Number of weeks each individual remained in first place of employment.	N.	F.	T.
One week.....	18	40	58
Two weeks.....	2	18	20
Three weeks.....	4	11	15
Four weeks.....	6	13	19
Five weeks.....	3	6	9
Six weeks.....	1	8	9
Seven weeks.....	2	5	7
Eight weeks.....	2	13	15
Nine weeks.....	1	3	4
Ten to nineteen.....	13	35	48
Twenty to twenty-nine.....	9	14	23
Thirty to forty-nine.....	4	9	13
Fifty and over.....	4	4	8
Total.....	69	179	268

TABLE 24.—*Adrian.—Concluded.*

Lowest weekly wage received by each individual.	N.	F.	T.
Less than \$1.00.....	1	8	9
\$1.00 to 1.50.....	4	10	14
1.50 to 2.00.....	1	17	18
2.00 to 2.50.....	9	10	19
2.50 to 3.00.....	2	21	23
3.00 to 3.50.....	7	8	15
3.50 to 4.00.....	.....	5	5
4.00 to 5.00.....	1	5	6
5.00 to 6.00.....	.....	.....	.....
Over \$6.00.....	2	1	3
Total.....	27	85	112
Highest weekly wage received by each individual.			
Under \$1.00.....	1	2	3
\$1.00 to \$2.00.....	3	13	16
2.00 to 2.50.....	3	18	21
2.50 to 3.00.....	5	10	15
3.00 to 4.00.....	8	24	32
4.00 to 5.00.....	6	24	30
5.00 to 6.00.....	9	18	27
6.00 to 7.00.....	4	10	14
7.00 to 8.00.....	0	3	3
8.00 to 9.00.....	2	3	5
9.00 to 10.00.....	1	2	3
Over \$10.00.....	3	1	4
Total.....	45	128	173

TABLE 25.—*Adrian and Lansing Industrial Schools.*  
DELINQUENT RECORD.

Character of first offense.*	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Arson.....					3	3
Assault.....					1	1
Attempt to kill.....				1		1
Burglary.....				14	8	22
Delinquent.....	1	1	2			
Dependent.....	6	26	32			
Disobedient.....	5	12	17	8	1	9
Disorderly.....		2	2	24	15	39
Drunkenness.....	1	2	3	3	1	4
Forgery.....	1	2	3	1		1
Fraudulent buying.....		1	1			
Hopping trains.....				2	2	4
Incorrigible.....	8	19	27	3	1	4
Indecent language.....		1	1	3	1	4
Larceny.....	12	23	35	229	126	355
Larceny and sex.....		6	6			
Malicious destruction of property.....		1	1	3	2	5
Neglected and dependent.....				13	17	30
Sex.....	34	94	128	3	2	5
Truancy.....	30	56	86	154	100	254
Truant and disorderly.....		4	4	8	11	19
Truant and larceny.....				10	8	18
Truant and sex.....		15	15			
Unmanageable.....	8	11	19			
Vagrancy.....				1	2	3
Violation of pure food law.....				1		1
Unknown.....	2	2	4	15	12	27
Total.....	108	278	386	496	313	809

Treatment for first offense.	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of individuals who were placed directly in:						
Industrial School.....	45	135	180	111	75	186
State Correctionary Institution (name unknown).....				1		1
Correctionary Institution (outside of state).....				1	1	2
Jail.....	4	7	11	6	2	8
Detention Home.....	25	42	67	39	17	56
Ford Republic.....				22	21	43
Salvation Army.....		2	2			
State Public School.....	2	4	6	4	8	12
Other State Charitable or Educational Institution.....				1	1	2
Private Orphan Asylum.....	7	25	32	22	4	26
County Infirmary.....	1	1	2			
Number of individuals who were placed on probation.....	14	27	41	169	87	256
Number of individuals who were dismissed.....	8	28	36	94	68	162
Number of individuals whose treatment was unknown.....	2	7	9	26	29	55
Total.....	108	278	386	496	313	809

\*By "First Offense" is meant the first delinquency which brought the individual in actual conflict with the law.

TABLE 25.—*Adrian and Lansing.*—Continued.

Probation Record.	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of times individuals were placed on probation.						
One time.....	11	18	29	86	43	129
Two times.....	2	6	8	37	15	52
Three times.....	1	3	4	15	15	30
Four times.....	.....	2	2	5	1	6
Five times.....	2	1	3	1	1	2
Six times.....	.....	.....	.....	1	1	2
Seven times.....	.....	.....	.....	1	.....	1
Eight times.....	.....	.....	.....	2	.....	2
Ten times.....	.....	.....	.....	1	.....	1
Unknown times.....	.....	.....	.....	1	.....	1
Total.....	16	30	46	150	76	226
Dismissal Record.						
Number of times individuals were dismissed:						
One time.....	1	.....	1	21	20	41
Two times.....	.....	.....	.....	9	7	16
Three times.....	.....	.....	.....	3	3	6
Total.....	1	.....	1	33	30	63
Number of Delinquencies.						
Number of individuals with:						
One.....	67	167	234	127	80	207
Two.....	26	78	104	161	103	264
Three.....	23	4	27	104	68	172
Four.....	2	6	8	51	34	85
Five.....	2	2	4	24	14	38
Six.....	1	.....	1	11	3	14
Seven.....	1	.....	1	1	.....	1
Eight.....	.....	.....	.....	5	1	6
Nine.....	1	.....	1	2	.....	2
Ten.....	.....	.....	.....	.....	4	4
Eleven.....	.....	.....	.....	3	.....	3
Unknown.....	4	2	6	7	6	13
Total.....	127	259	386	496	313	809

TABLE 25.—*Adrian and Lansing.—Concluded.*

Causes of Commitment.	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of individuals committed for:						
Arson.....	1	1	2	2	3	5
Assault.....				3	7	10
Burglary.....				15	14	29
Forgery.....				1		1
Grand larceny.....				8	7	15
Immorality.....	34	117	151			
Immoral plus other offenses*.....	11	16	27			
Larceny.....	14	32	46	281	149	430
Malicious destruction of property.....				7	4	11
Neglected and dependent.....	4	6	10		3	3
Truant.....	24	49	73	66	72	138
Truant and disorderly.....	29	69	98	84	31	115
Other causes.....	1	1	2	25	21	46
Cause unknown.....	1	3	4	4	2	6
*Total.....	108	278	386	496	313	809

\*Total for Adrian does not include the figures for the "Immoral plus other offenses" as these numbers have already been included under the different offenses such as larceny, truancy, etc.

## AGE OF COMMITMENT.

Number of individuals whose age was the following number of years.	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Ten.....	4	6	10	32	17	49
Eleven.....	2	15	17	65	24	89
Twelve.....	8	16	24	86	41	127
Thirteen.....	12	26	38	88	65	153
Fourteen.....	19	51	70	99	75	174
Fifteen.....	22	67	89	76	66	142
Sixteen.....	30	71	101	47	24	71
Seventeen.....	11	25	36			
Unknown.....		1	1	3	1	4
Total.....	108	278	386	496	313	809

TABLE 26.—*Institutional record subsequent to first offense.\**

Total institutional residences.	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of individuals who had been resident in the following number of institutions:						
One.....	20	47	67	72	48	120
Two.....	8	13	21	42	14	56
Three.....	1	1	2	20	2	22
Four.....	.....	.....	.....	2	.....	2
Five.....	2	.....	2	2	.....	2
Six.....	.....	.....	.....	2	.....	2
Total.....	31	61	92	140	64	204
Correctionary institutional residences.						
Number of individuals who had been resident in the following number of correctionary institutions:						
One.....	20	39	59	74	45	119
Two.....	3	6	9	33	12	45
Three.....	.....	1	1	10	2	12
Four.....	1	.....	1	2	.....	2
Five.....	.....	.....	.....	2	.....	2
Six.....	.....	.....	.....	2	.....	2
Total.....	24	46	70	123	59	182
Number of individuals who had been resident in the following number of non-correctionary institutions:						
One.....	8	10	18	22	7	29
Two.....	3	2	5	7	.....	7
Three.....	1	3	4	1	.....	1
Total.....	12	15	27	30	7	37

## DISTRIBUTION OF CORRECTIONARY INSTITUTIONAL RESIDENCES.

	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of individuals who had been in the Ford Republic:						
One time.....	.....	.....	.....	15	1	16
Two times.....	.....	.....	.....	1	.....	1
Three times.....	.....	.....	.....	1	.....	1
Five times.....	.....	.....	.....	2	.....	2
Total.....	.....	.....	.....	19	1	20

\*Does not include the present residence at the State Industrial School.



TABLE 26.—*Concluded.*

	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of individuals who had been in jail:						
One time.....	2	2	4	9	4	13
Four times.....				1		1
Total.....	2	2	4	10	4	14
Number of individuals who had been in the State Industrial School:						
One time.....		1	1	25	12	37
Two times.....					1	1
Three times.....				2		2
Total.....		1	1	27	13	40
Number of individuals who had been in a detention home:						
One time.....	18	37	55	52	36	88
Two times.....	3	6	9	11	1	12
Three times.....		1	1			
Four times.....	1		1	1		1
Total.....	22	44	66	64	37	101
Number of individuals who had been in other correctionary institutions:						
One time.....				4		4

## DISTRIBUTION OF NON-CORRECTIONARY INSTITUTIONAL RESIDENCES.

	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of individuals who had been in the State Public School:						
Once.....	1	3	4	1		1
Twice.....		3	3			
Total.....	1	6	7	1		1
Number of individuals who had been in other State charitable or educational institutions:						
Once.....				1	2	3
Number of individuals who had been in private orphan asylums:						
Once.....	7	8	15	18	4	22
Twice.....	3	2	5	5		5
Three times.....	1		1	1		1
Total.....	11	10	21	24	4	28
Number of individuals who had been in county infirmaries:						
Once.....		2	2	4	1	5

TABLE 27.—*Lansing Industrial School.*

## HABITS.

Sex habits.*	N.	F.	T.
Number of individuals who had practiced:			
Sodomy.....	35	24	59
Masturbation.....	93	60	153
Number of individuals who had had sexual intercourse.....	53	32	85
1 to 3 times.....	21	16	37
4 to 10 times.....	8	6	14
Over 10 times†.....	19	7	26
Number of individuals who had practiced:			
Sodomy and masturbation.....	26	23	49
Sodomy, masturbation, and had had sexual intercourse.....	9	8	17
Either sodomy, masturbation, or both.....	102	61	163
One or more of the sex habits.....	110	64	174
Use of tobacco.			
Number of individuals who had:			
Smoked.....	354	227	581
Smoked excessively.....	65	48	113
Chewed.....	154	123	277
Chewed since coming to the Institution.....	25	5	30
Use of alcohol.			
Number of individuals who had been drunk the following number of times:			
One.....	32	25	57
Two.....	9	13	22
Three.....	1	3	4
Four.....	3	3	6
Five or more.....	7	9	16
Number of individuals, the extent of whose drinking is unknown.....	117	51	168
Total.....	169	104	273
*Total cases considered.....			229
Total normal cases considered.....			147
Total feeble-minded cases considered.....			82

*Adrian Industrial School.*

	N.	F.	T.
Number of individuals who had had intercourse with the following number of men:			
One.....	13	39	52
Two.....	17	35	52
Three.....	14	31	45
Four.....	5	11	16
Five.....	5	8	13
Six.....	2	10	12
Seven to nine.....	3	8	11
Over ten.....	2	22	24
Unknown number.....	7	31	38
Total.....	68	195	263

†Including those who had had intercourse "a great many times," exact number unknown.

TABLE 28.—*Adrian and Lansing Industrial Schools.*

## NATIVITY OF INMATES.

	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Place of birth unknown.....	7	7	14	9	18	27
Austria-Hungary.....				9	2	11
Canada.....	6	16	22	5	8	13
England—Wales.....		1	1	4	.....	4
Finland.....				2	1	3
France.....				.....	1	1
Germany.....		1	1	5	3	8
Holland.....	1	1	2	.....	1	1
Ireland.....				1	.....	1
Italy.....	1	.....	1	4	1	5
Norway.....		1	1	.....	.....	.....
German Poland.....				.....	2	2
Russian Poland.....				20	11	31
Russia.....		1	1	2	.....	2
Scotland.....				.....	1	1
Sweden.....				1	.....	1
Other countries.....				6	2	8
Total foreign born.....	8	21	29	59	33	92
Michigan.....	78	216	294	356	237	593
Illinois.....	2	4	6	20	5	25
Indiana.....		8	8	11	2	13
New York.....		2	2	7	4	11
Ohio.....	2	6	8	11	7	18
Pennsylvania.....	2	4	6	5	3	8
New England States.....	2	.....	2	4	1	5
Southern States.....	2	3	5	4	2	6
Western States.....	5	7	12	10	1	11
Total native born.....	93	250	343	428	262	690

TABLE 29.—*Adrian and Lansing Industrial Schools.*

## NATIVITY OF INMATES' PARENTS.\*

	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Place of birth unknown.....	56	159	215	222	179	401
Austria Hungary.....	1	4	5	22	6	28
Canada.....	17	73	90	63	32	95
England.....	5	6	11	19	11	30
Finland.....	.....	6	6	8	2	10
France.....	1	1	2	5	11	16
Germany.....	13	43	56	89	55	144
Holland.....	5	5	10	9	7	16
Ireland.....	1	.....	1	16	3	19
Italy.....	2	.....	2	13	10	23
Norway.....	2	2	4	2	.....	2
German Poland.....	.....	2	2	7	14	21
Russian Poland.....	1	3	4	127	99	226
Russia.....	.....	2	2	6	.....	6
Scotland.....	3	5	8	3	4	7
Sweden.....	3	5	8	11	4	15
Switzerland.....	.....	.....	.....	1	.....	1
Other countries.....	.....	4	4	19	5	24
Total foreign born.....	54	161	215	420	263	683
Michigan.....	64	144	208	237	137	374
Illinois.....	3	1	4	8	2	10
Indiana.....	6	12	18	16	8	24
New York.....	10	15	25	18	4	22
Ohio.....	6	19	25	16	16	32
Pennsylvania.....	4	9	13	4	8	12
New England States.....	5	1	6	4	2	6
Southern States.....	1	5	6	14	4	18
Western States.....	4	10	14	14	1	15
State unknown.....	3	20	23	19	2	21
Total native born.....	106	234	342	350	184	534

## SUMMARY.

	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Both parents foreign born.....	15	56	71	179	114	293
One parent foreign born.....	24	50	74	62	36	98
Both parents native born.....	37	79	116	140	70	210
One parent native born, one unknown.....	13	46	59	33	22	55
Both parents unknown.....	19	47	66	82	71	153
Total.....	108	278	386	496	313	809

\*Figures include nativity for both the fathers and mothers.

TABLE 30.—*Adrian and Lansing Industrial Schools.*

## RESIDENTIAL HISTORY.

	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of individuals committed from:						
Detroit.....	27	45	72	154	95	249
Grand Rapids.....	12	19	31	43	23	66
Cities from:						
24,000 to 51,000 inclusive.....	20	42	62	71	43	114
10,000 to 18,000 inclusive.....	12	34	46	55	30	85
5,000 to 9,999 inclusive.....	8	39	47	52	27	79
2,000 to 4,999 inclusive.....	9	28	37	33	23	56
1,000 to 1,999 inclusive.....	4	7	11	23	22	45
Less than 1,000.....	15	48	63	40	28	68
Rural districts.....	.....	9	9	19	12	31
Place unknown.....	1	7	8	6	10	16
Total.....	108	278	386	496	313	809
Number of individuals who had lived in the following number of cities outside of Michigan:						
One.....	26	47	73	99	54	153
Two.....	7	16	23	36	16	52
Three.....	3	7	10	25	6	31
Four.....	2	2	4	4	2	6
Five.....	.....	3	3	3	.....	3
Six.....	1	1	2	2	.....	2
Seven.....	.....	.....	.....	.....	.....	.....
Eight.....	.....	.....	.....	1	.....	1
Over eight.....	.....	.....	.....	2	.....	2
Unknown.....	69	202	271	324	235	559
Total.....	108	278	386	496	313	809
Number of individuals who had lived in the following number of cities:						
One*.....	26	73	99	159	120	279
Two.....	28	75	103	118	64	182
Three.....	15	48	63	74	48	122
Four.....	19	34	53	57	28	85
Five.....	6	18	24	38	23	61
Six.....	5	15	20	14	9	23
Seven.....	3	3	6	7	4	11
Eight.....	2	2	4	4	3	7
Over eight.....	2	5	7	9	.....	9
Unknown.....	2	5	7	16	14	30
Total.....	108	278	386	496	313	809
Number of individuals who had moved the following number of times:						
One.....	12	27	39	72	44	116
Two.....	14	35	49	77	54	131
Three.....	15	55	70	80	57	137
Four.....	13	27	40	78	43	121
Five.....	13	35	48	50	36	86
Six.....	18	22	40	35	11	46
Seven.....	9	14	23	18	12	30
Eight.....	2	13	15	9	2	11
Nine.....	2	13	15	10	3	13
Ten.....	4	7	11	9	1	10
Over ten.....	5	14	19	8	5	13
Unknown.....	1	4	5	30	23	53
Number of individuals who had never moved.....	.....	12	12	20	22	42
Total.....	108	278	386	496	313	809

\*A city lived in at different periods is counted as a separate city.

TABLE 31.—*Adrian and Lansing Industrial Schools.*

## COUNTY OF COMMITMENT.

Number of individuals committed from	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Alcona.....				1		1
Alger.....		1	1	4	3	7
Allegan.....		2	2	7	5	12
Alpena.....		1	1	3	6	9
Antrim.....		1	1	2		2
Baraga.....				1		1
Barry.....	1	3	4	2	4	6
Bay.....	1	2	3	6	4	10
Benzie.....	1	1	2	2		2
Berrien.....	3	10	13	13	3	16
Branch.....		1	1	3	4	7
Calhoun.....	3	3	6	24	4	28
Cass.....					2	2
Charlevoix.....	1	5	6	5	3	8
Cheboygan.....		2	2	1	1	2
Chippewa.....	1	2	3	5	7	12
Clare.....		1	1			
Delta.....	4	1	5	4	6	10
Dickinson.....	1	2	3	2	2	4
Eaton.....	3	3	6	2	1	3
Emmet.....	2	2	4	3	3	6
Genesee.....	4	7	11	3	3	6
Gladwin.....	1		1		1	1
Gogebic.....		1	1		2	2
Grand Traverse.....	1	4	5	5	3	8
Gratiot.....		2	2	4		4
Hillsdale.....				3	3	6
Houghton.....	1	8	9	11	5	16
Huron.....		3	3		3	3
Ingham.....	4	3	7	8	12	20
Ionia.....		5	5	9	1	10
Iosco.....	1		1	1		1
Iron.....	1		1	6		6
Isabella.....	2	5	7	4	2	6
Jackson.....	1	5	6	12	7	19
Kalamazoo.....	8	17	25	16	11	27
Kalkaska.....		1	1		1	1
Kent.....	12	19	31	44	24	68
Keweenaw.....				1		1
Lake.....		1	1	1	4	5
Lapeer.....		5	5	4	2	6
Lenawee.....		2	2	4	1	5
Mackinac.....	2	2	4		2	2
Macomb.....	1	8	9	4	5	9
Manistee.....	1	7	8	4	4	8
Marquette.....	3	1	4	3	5	8
Mason.....				1	1	2
Mecosta.....		2	2	3		3
Menominee.....		2	2	2	1	3
Midland.....	1	3	4	4	2	6
Missaukee.....	1	2	3	2		2
Monroe.....	1	7	8	5	4	9
Montcalm.....	1	6	7	3	3	6
Montmorency.....						
Muskegon.....		1	1	4	4	8

TABLE 31.—*Concluded.*

Number of individuals committed from	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Newaygo.....	1	1	2	.....	2	2
Oakland.....	1	3	4	10	5	15
Oceana.....	.....	.....	.....	1	2	3
Ogemaw.....	1	2	3	1	1	2
Ontonagon.....	.....	2	2	1	.....	1
Osceola.....	1	3	4	2	2	4
Oscoda.....	.....	1	1	.....	.....	.....
Otsego.....	.....	.....	.....	.....	1	1
Ottawa.....	1	8	9	5	.....	5
Presque Isle.....	1	2	3	1	3	4
Roscommon.....	.....	1	1	.....	.....	.....
Saginaw.....	.....	5	5	13	1	14
Sanilac.....	.....	3	3	3	2	5
Schoolcraft.....	.....	1	1	2	2	4
Shiawassee.....	.....	1	1	1	4	5
St. Clair.....	2	5	7	11	7	18
St. Joseph.....	1	1	2	2	2	4
Tuscola.....	.....	1	1	4	2	6
Van Buren.....	.....	3	3	4	2	6
Washtenaw.....	3	7	10	8	.....	8
Wayne.....	27	48	75	161	99	260
Wexford.....	1	6	7	2	.....	2
Unknown.....	.....	2	2	3	2	5
Total.....	108	278	386	496	313	809

TABLE 32.—*Lansing Industrial School.*

## PATERNAL OCCUPATIONS.

Skilled work.	N.	F.	T.
Trade*.....	68	19	87
Carpenter.....	23	13	36
Painter.....	19	4	23
Railroad, skilled.....	14	7	21
Store owners.....	8	1	9
Tailor.....	5	1	6
Printer.....	4	1	5
Contractor.....	4	1	5
Clerk.....	4	1	5
Barber.....	3	5	8
Office.....	3	.....	3
Traveling man.....	2	.....	2
Automobile.....	2	.....	2
Insurance.....	1	.....	1
Chauffeur.....	1	1	2
Minister.....	1	.....	1
Real estate.....	1	.....	1
Revenue officer.....	1	.....	1
Acrobat.....	1	.....	1
Butcher.....	.....	2	2
Jeweler.....	.....	1	1
Total.....	165	57	222
Unskilled work.			
Laborer.....	89	67	156
Factory.....	80	61	141
Miner.....	15	4	19
Railroad, unskilled.....	12	6	18
Lumberman.....	5	16	21
Section hand.....	5	2	7
Longshoreman.....	1	2	3
Sailor.....	1	3	4
Walter.....	1	.....	1
Fisherman.....	1	3	4
Total.....	210	164	374
Work unclassified as to skill.			
Unknown occupation.....	81	55	136
Farmers.....	29	29	58
Bartenders.....	2	7	9
Saloon.....	2	.....	2
Junk dealer.....	2	.....	2
Peddler.....	2	1	3
Fruit peddler.....	2	.....	2
Lighthouse keeper.....	1	.....	1
Total.....	121	92	213

\*The following were classed as trades: blacksmith, bricklayer, cement worker, chef, cigar maker, electrician, harness maker, mason, mill wright, plasterer, plumber, ship builder, shoemaker, stationary engineer, and stone cutter.



TABLE 33.—*Lansing Industrial School.*

## MATERNAL OCCUPATIONS.

	N.	F.	T.
Wage earning by home work.....	67	67	134
General jobs outside of home.....	76	48	124
Hotel.....	11	1	12
Stores.....	7	2	9
Cigar factory.....	8	1	9
Other factories.....	7	9	16
Dressmaking.....	7	2	9
Nursing.....	4	1	5
Boarding house.....	6	.....	6
Roomers.....	3	.....	3
Laundry.....	4	2	6
Teacher.....	.....	.....	.....
Chief telephone operator.....	1	.....	1
Tailor.....	1	.....	1
Worked, but kind unknown.....	4	.....	4
No facts signifying that they worked.....	290	180	470
<b>Total.....</b>	<b>496</b>	<b>313</b>	<b>809</b>

TABLE 34.—*Adrian and Lansing Industrial Schools.*

## INSTITUTIONAL RECORD OF RELATIVES.

	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of parents who had been in:						
Adrian Industrial Home.....	1	1	2	2	.....	2
Lansing Industrial School.....	1	.....	1	.....	.....	.....
State Prisons.....	1	10	11	5	2	7
House of Correction.....	.....	5	5	14	11	25
Jail.....	4	16	20	60	46	106
Correctionary institutions outside of Michigan.....	1	1	2	6	.....	6
State charitable or educational institutions*.....	.....	2	2	2	.....	2
Insane hospitals.....	1	3	4	8	2	10
State Public School.....	.....	1	1	1	1	2
County Infirmaries.....	.....	8	8	1	1	2
Number of fraternity who had been in:						
Adrian Industrial Home†.....	4	20	24	9	16	25
Lansing Industrial School†.....	3	37	40	51	47	98
Ford Republic.....	.....	.....	.....	8	2	10
House of Good Shepherd.....	1	3	4	8	5	13
State prisons.....	2	10	12	6	2	8
House of Correction.....	.....	1	1	7	4	11
Jail.....	.....	3	3	23	25	48
Correctionary institutions outside of Michigan.....	.....	2	2	5	.....	5
Lapeer Home and Training School.....	1	2	3	4	2	6
State charitable or educational institutions.....	.....	1	1	3	5	8
Insane hospitals.....	1	1	2	1	1	2
State Public School.....	4	30	34	19	20	39
County Infirmaries.....	.....	3	3	.....	.....	.....
Private orphan asylums.....	1	12	13	30	12	42
Number of other relatives who had been in:						
Adrian Industrial Home.....	.....	14	14	4	3	7
Lansing Industrial School.....	2	12	14	24	14	38
State prisons.....	1	7	8	8	1	9
House of Correction.....	1	3	4	7	2	9
Jails.....	4	3	7	24	16	40
Correctionary institutions outside of Michigan.....	.....	1	1	3	.....	3
Lapeer Home and Training School.....	.....	3	3	4	2	6
State charitable or educational institutions.....	.....	.....	.....	2	.....	2
Insane hospitals.....	2	2	4	7	5	12
State Public School.....	.....	1	1	4	5	9
County Infirmaries.....	.....	.....	.....	4	3	7
Private orphan asylums.....	.....	.....	.....	3	.....	3
Total institutional record of relatives (parents, fraternity and other relatives):						
Adrian Industrial Home.....	5	35	40	15	19	34
Lansing Industrial School.....	6	49	55	75	61	136
Ford Republic.....	.....	.....	.....	8	2	10
House of Good Shepherd.....	1	3	4	8	5	13
State prisons.....	4	27	31	19	5	24
House of Correction.....	1	9	10	28	17	45
Jails.....	8	22	30	107	87	194
Correctionary institutions outside of Michigan.....	1	4	5	14	.....	14
Lapeer Home and Training School.....	1	5	6	8	4	12
State Public School.....	4	32	36	24	26	50
State charitable or educational institution.....	.....	3	3	7	5	12
County Infirmaries.....	.....	11	11	5	4	9
Insane hospitals.....	4	6	10	16	8	24
Private orphan asylums.....	1	12	13	33	12	45

\*Schools for the deaf, blind, etc.

†In those cases where there were two of the fraternity in the school at the time of the investigation, only one was considered as having a fraternity in the institution.

TABLE 35.—*Adrian and Lansing Industrial Schools.*

## GENERAL PARENTAL FACTS.

Use of alcohol.	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of children whose fathers drank:						
Amount unknown.....	34	108	142	149	98	247
Moderately.....	12	29	41	10	4	14
Excessively.....				93	68	161
Total.....	46	137	183	252	170	422
Number of children whose mothers drank:						
Amount unknown.....	9	32	41	22	20	42
Excessively.....	1	4	5	10	5	15
Total.....	10	36	46	32	25	57
Number of families that had received aid from city or county.....	10	45	55	62	69	131

TABLE 36.—*Adrian and Lansing Industrial Schools.*

## FRATERNITY.

	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of families in which the children numbered:						
One.....	11	10	21	37	19	56
Two.....	15	23	38	44	18	62
Three.....	17	27	44	52	39	91
Four.....	17	34	51	81	53	134
Five.....	6	30	36	71	45	116
Six.....	11	33	44	52	42	94
Seven.....	10	29	39	48	23	71
Eight.....	8	37	45	44	24	68
Nine.....	2	16	18	28	20	48
Ten.....	2	14	16	13	9	22
Eleven.....	3	6	9	6	6	12
Twelve.....	2	6	8	6	4	10
Thirteen.....		3	3	3	2	5
Fifteen.....		4	4			
Sixteen.....				1	1	2
Seventeen.....		1	1	1		1
Unknown.....	4	5	9	9	8	17
Total.....	108	278	386	496	313	809

TABLE 37.—*Adrian and Lansing Industrial Schools.*

## CIVIL STATUS OF PARENTS.

	Adrian.			Lansing.		
	N.	F.	T.	N.	F.	T.
Number of families in which:						
The parents are living together.....	31	70	101	198	138	336
The parents are not living together.....	65	191	256	278	157	435
The child was an adopted member.....	.....	3	3	2	4	6
The condition is unknown.....	12	14	26	18	14	32
Total.....	108	278	386	496	313	809
Number of families broken up by:						
Death of the mother.....	17	62	79	72	46	118
Death of the father.....	17	54	71	71	44	115
Death of both parents.....	3	8	11	15	6	21
Separation or divorce.....	21	47	68	84	46	130
Desertion of the mother.....	.....	7	7	7	5	12
Desertion of the father.....	7	13	20	29	10	39
Total.....	65	191	256	278	157	435
Number of parents who were remarried:						
Widows.....	7	29	36	32	23	55
Widowers.....	7	27	34	41	21	62
Separated or divorced mothers.....	5	21	26	34	19	53
Separated or divorced fathers.....	3	12	15	11	8	19
Deserted or deserting mothers.....	4	6	10	7	3	10
Deserted or deserting fathers.....	.....	.....	.....	3	1	4
Total.....	26	95	121	128	75	203
Disposition of children.*						
Of widows:*						
Children placed with relatives.....	.....	5	5	5	2	7
Children placed in institutions.....	.....	.....	.....	2	.....	2
Of widowers:						
Children placed with relatives.....	1	3	4	14	7	21
Children placed in institutions.....	.....	1	1	3	2	5
Where both parents died:						
Children placed with relatives.....	2	4	6	10	2	12
Children placed in institutions.....	.....	.....	.....	1	2	3
Of divorced or separated parents:						
Children placed with relatives.....	4	.....	4	9	6	15
Children placed in institutions.....	.....	1	1	2	.....	2
Mother kept child.....	2	3	5	32	18	50
Father kept child.....	1	3	4	4	5	9
Both kept child.....	2	1	3	3	3	6

\*While these figures do not give the facts concerning the disposition of all the children, it does give the facts for all those placed in institutions.

TABLE 38.—*Mentality of County Infirmiry population.*

	M.	F.	T.
Feeble-minded .....	382	328	710
Epileptic .....	70	44	114
Insane .....	249	158	407
Of X mentality .....	58	23	81
Total insane and defective group .....	759	553	1,312
Normal .....	1,680	257	1,937
Neurotic .....	18	19	37
Total normal group .....	1,698	276	1,974
Questionable mentality .....	33	15	48
Total of all groups .....	2,490	844	3,334

TABLE 39.—*Mental classification of County Infirmary population by county.*

County.	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Alcona.....	1	1	2	.....	.....	.....	0	1	1	1	.....	.....	2	2	4
Alger.....	9	0	9	.....	.....	.....	.....	.....	.....	1	.....	.....	10	0	10
Allegan.....	15	3	18	.....	.....	.....	.....	.....	.....	0	.....	.....	36	15	51
Alpena.....	10	0	10	3	0	3	9	7	16	21	12	33	15	2	17
Antrim.....	10	1	11	1	0	1	2	2	4	5	2	7	16	3	19
Baraga.....	7	0	7	.....	.....	.....	.....	.....	.....	6	.....	.....	7	0	7
Barry.....	5	3	8	.....	.....	.....	.....	.....	.....	7	6	.....	14	11	25
Bay.....	28	2	30	7	1	8	6	2	8	16	3	19	44	5	49
Benzie.....	6	0	6	1	0	1	2	2	4	4	2	6	10	2	12
Berrien.....	29	5	34	7	4	11	5	7	12	13	12	25	43	17	60
Branch.....	14	1	15	1	2	3	8	11	19	11	13	24	25	14	39
Calhoun.....	26	5	31	6	2	8	9	8	17	18	13	31	44	18	62
Cass.....	8	3	11	3	3	6	6	9	15	11	13	24	19	16	35
Charlevoix.....	7	2	9	0	1	1	0	1	1	0	2	2	7	5	12
Cheboygan.....	10	1	11	2	0	2	4	2	6	6	3	9	17	4	21
Chippewa.....	8	2	10	3	0	3	0	2	2	3	3	6	11	5	16
Clare.....	6	1	7	2	0	2	3	0	3	5	1	6	11	2	13
Clinton.....	4	2	6	4	2	6	6	7	13	10	10	20	14	12	26
Crawford.....	5	0	5	.....	.....	.....	1	0	1	2	0	2	7	0	7
Delta.....	42	0	42	2	1	3	7	0	7	9	1	10	51	1	52
Dickinson.....	13	3	16	0	1	1	.....	.....	.....	1	1	2	14	5	19
Eaton.....	9	3	12	3	0	3	8	10	18	13	10	23	22	13	35
Emmet.....	2	0	2	1	1	2	1	2	3	2	3	5	5	3	8
Genesee.....	28	6	34	10	7	17	11	9	20	24	18	42	52	24	76
Gladwin.....	3	0	3	1	0	1	2	2	4	5	2	7	8	2	10
Gogebic.....	10	2	12	1	0	1	1	0	1	4	0	4	14	3	17
Grand Traverse.....	8	0	8	2	0	2	0	2	2	2	2	4	10	2	12
Gratiot.....	7	2	9	0	3	3	9	9	18	11	12	23	18	14	32
Hillsdale.....	9	2	11	4	1	5	13	9	22	19	10	29	28	12	40
Houghton.....	42	5	47	7	3	10	8	2	10	16	5	21	60	10	70
Huron.....	9	1	10	1	2	3	4	0	4	5	3	8	14	5	19
Ingham.....	26	7	33	7	6	13	8	7	15	17	13	30	43	21	64
Ionia.....	15	1	16	2	3	5	9	7	16	12	11	23	27	13	40
Iosco.....	4	1	5	2	0	2	1	1	2	5	1	6	9	2	11
Iron.....	7	0	7	3	0	3	.....	.....	.....	3	0	3	10	0	10

TABLE 39.—Continued.

County.	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Isabella.....	9	2	11	1	2	3	6	2	8	8	6	14	17	8	25
Jackson.....	34	2	36	3	5	8	4	6	10	8	11	19	43	13	56
Kalamazoo.....	34	9	43	1	1	2	7	4	11	10	6	16	44	15	59
Kalkaska.....	8	0	8	.....	.....	.....	.....	.....	.....	2	2	4	10	2	12
Kent.....	74	5	79	4	9	13	17	11	28	27	21	48	101	29	130
Lake.....	3	1	4	.....	.....	.....	2	0	2	3	0	3	6	1	7
Lapeer.....	12	4	16	1	2	3	13	2	15	14	4	18	26	8	34
Leelanau.....	2	1	3	2	1	3	2	2	4	4	3	7	6	4	10
Lenawee.....	20	8	28	2	9	11	3	11	14	9	23	32	30	31	61
Livingston.....	7	1	8	3	1	4	3	4	7	7	5	12	14	6	20
Luce.....	3	1	4	.....	.....	.....	.....	.....	.....	.....	.....	.....	3	1	4
Macomb.....	19	3	22	3	2	5	4	2	6	10	4	14	29	7	36
Manistee.....	27	6	33	3	4	7	3	2	5	6	7	13	34	13	47
Marquette.....	24	2	26	4	0	4	4	7	11	10	7	17	34	9	43
Mason.....	16	4	20	0	2	2	3	1	4	7	3	10	25	7	32
Mecosta.....	14	3	17	3	0	3	5	7	12	9	9	18	23	12	35
Menominee.....	12	2	14	2	0	2	3	2	5	7	2	9	20	4	24
Midland.....	5	2	7	2	0	2	3	5	8	7	5	12	12	7	19
Missaukee.....	7	1	8	.....	.....	.....	1	0	1	1	0	1	8	1	9
Monroe.....	13	1	14	3	2	5	5	5	10	12	8	20	25	9	34
Montcalm.....	5	4	9	2	1	3	4	10	14	8	13	21	13	17	30
Montmorency.....	1	1	2	.....	.....	.....	1	2	3	1	3	4	2	4	6
Muskegon.....	31	6	37	8	6	14	6	4	10	16	12	28	48	19	67
Newaygo.....	10	2	12	5	3	8	0	3	3	6	7	13	16	9	25
Oakland.....	25	5	30	13	2	15	13	6	19	31	11	42	56	16	72
Oceana.....	5	2	7	0	1	1	7	4	11	7	5	12	12	7	19
Ogemaw.....	3	0	3	1	0	1	2	1	3	4	1	5	8	2	10
Ontonagon.....	18	0	18	.....	.....	.....	.....	.....	.....	.....	.....	.....	18	0	18
Osceola.....	10	2	12	0	3	3	3	6	9	3	9	12	13	11	24
Otsego.....	6	0	6	.....	.....	.....	1	1	2	1	1	2	7	1	8
Ottawa.....	10	2	12	6	5	11	9	2	11	18	7	25	28	9	37
Presque Isle.....	8	0	8	3	1	4	2	2	4	5	3	8	14	5	19
Roscommon.....	2	1	3	.....	.....	.....	0	2	2	0	2	2	3	3	6
Saginaw.....	37	5	42	10	9	19	13	7	20	26	21	47	63	26	89
Sanilac.....	7	3	10	4	2	6	2	8	10	8	10	18	16	13	29

TABLE 39.—*Concluded.*

County.	Normal group.			Insane.			Feebleminded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Schoolcraft.....	12	0	12	1	1	2	.....	.....	.....	1	1	2	13	1	14
Shiawassee.....	5	1	6	3	3	6	.....	.....	.....	8	14	22	13	15	28
St. Clair.....	22	4	26	6	3	9	11	7	18	22	13	35	44	17	61
St. Joseph.....	8	2	10	5	0	5	2	4	6	7	5	12	15	7	22
Tuscola.....	12	2	14	7	3	10	5	8	13	14	11	25	26	13	39
Van Buren.....	13	6	19	3	1	4	8	4	12	12	6	18	25	12	37
Washtenaw.....	21	2	23	1	1	2	9	12	21	15	15	30	36	17	53
Wayne.....	623	101	724	36	25	61	36	23	59	91	64	155	729	165	894
Wexford.....	19	2	21	1	0	1	4	2	6	6	3	9	25	5	30
Total.....	1,698	276	1,974	249	158	407	382	328	710	759	553	1,312	2,490	844	3,334



TABLE 40.—*Forms of insanity in County Infirmaries.*

	M.	F.	T.
Senile dementia.....	133	94	227
General paralysis of the insane.....	22	3	25
Manic depressive insanity.....	11	6	17
Dementia praecox.....	8	10	18
Paranoid forms.....	3	.....	3
Alcoholic insanities.....	6	.....	6
Chorea with insanity.....	4	3	7
Traumatic insanity.....	3	.....	3
Morphinism.....	1	.....	1
Hysteria.....	.....	1	1
Form unknown.....	49	34	83
Insanity questionable.....	9	7	16
Total.....	249	158	407

TABLE 41.—*Nativity of County Infirmary population.*

	Normal.	Neurotic.	Insane.	F. M.	Epileptic.	X.	?	Total.
Place of birth unknown.....	13	1	26	56	11	4	5	116
Austria.....	19	.....	1	2	.....	.....	1	23
Belgium.....	9	.....	1	2	.....	.....	.....	12
Canada.....	217	3	42	60	7	11	4	344
Denmark.....	7	.....	3	.....	.....	.....	1	11
England—Wales.....	102	3	24	18	4	2	2	155
Finland.....	21	.....	4	3	.....	1	.....	29
France.....	11	2	1	1	2	.....	.....	17
Germany—Prussia.....	270	5	44	30	8	8	5	370
Holland.....	29	1	6	10	.....	.....	.....	46
Hungary.....	8	.....	.....	2	.....	.....	1	11
Ireland.....	140	.....	21	11	2	4	.....	178
Italy.....	7	.....	.....	1	.....	.....	.....	8
Norway.....	17	.....	3	6	.....	1	.....	27
German Poland.....	19	.....	.....	1	.....	.....	.....	20
Russian Poland.....	7	.....	3	.....	.....	.....	.....	10
Russia.....	18	.....	.....	1	1	.....	.....	20
Scotland.....	44	1	4	5	.....	2	1	57
Sweden.....	51	.....	8	3	1	3	.....	66
Switzerland.....	13	.....	2	1	.....	.....	.....	16
Other Countries.....	19	.....	.....	2	1	.....	2	24
Total foreign born.....	1,028	15	167	159	26	32	17	1,444
Michigan.....	348	8	63	324	49	17	17	826
Indiana.....	17	.....	7	19	2	1	1	47
New York.....	251	5	89	63	11	17	4	440
Ohio.....	92	4	18	46	5	2	.....	167
Pennsylvania.....	51	.....	11	11	1	2	1	77
New Jersey.....	11	.....	4	1	.....	.....	.....	16
New England States.....	52	2	10	10	1	2	1	78
Southern States.....	42	1	6	4	3	1	1	58
Western States.....	31	1	6	12	4	2	1	57
State unknown.....	1	.....	.....	5	1	1	.....	8
Total native born.....	896	21	214	495	77	45	26	1,774
Michigan:								
County born.....	180	6	29	196	33	11	14	469
County unknown.....	20	.....	6	25	2	1	1	55

TABLE 42.—*Number of foreign born in the different mental classifications of County Infirmiry population. Also, in each case, the number per 10,000 of the total foreign born population in the state.*

## ACTUAL NUMBER.

County.	Normal group.	Feeble-minded and epileptic.	Total insane and defective group.	Total population.
Alcona.....	1	0	1	2
Alger.....	6	0	1	7
Allegan.....	6	1	5	11
Alpena.....	8	2	4	12
Antrim.....	4	4	4	8
Baraga.....	6	0	0	6
Barry.....	2	0	1	3
Bay.....	24	3	8	32
Benzie.....	5	1	1	6
Berrien.....	12	2	4	16
Branch.....	0	1	1	1
Calhoun.....	3	3	7	10
Cass.....	0	0	0	0
Charlevoix.....	3	0	1	5
Cheboygan.....	7	4	7	14
Chippewa.....	7	0	3	10
Clare.....	2	0	0	2
Clinton.....	3	1	1	4
Crawford.....	4	1	1	5
Delta.....	37	5	7	44
Dickinson.....	12	1	2	14
Eaton.....	4	1	3	7
Emmet.....	0	0	0	0
Genesee.....	16	4	8	24
Gladwin.....	3	1	2	5
Gogebic.....	8	3	4	12
Grand Traverse.....	4	0	0	4
Gratiot.....	4	1	1	5
Hillsdale.....	3	1	1	4
Houghton.....	43	5	14	58
Huron.....	8	4	7	15
Ingham.....	7	1	3	10
Ionia.....	7	1	5	12
Iosco.....	4	2	4	8
Iron.....	6	0	2	8
Isabella.....	5	3	3	8
Jackson.....	8	1	3	11
Kalamazoo.....	16	4	4	20
Kalkaska.....	3	0	0	3
Kent.....	39	11	18	58
Lake.....	1	0	0	1
Lapeer.....	5	6	6	11
Leelanau.....	3	1	1	4
Lenawee.....	5	0	3	8
Livingston.....	4	3	4	8
Luce.....	1	0	0	1
Macomb.....	11	0	3	14
Manistee.....	30	5	11	41
Marquette.....	20	7	10	30
Mason.....	15	0	2	19
Mecosta.....	4	2	2	6
Menominee.....	11	4	5	17
Midland.....	3	1	2	5
Missaukee.....	5	0	0	5
Monroe.....	5	1	3	8

TABLE 42.—Continued.

ACTUAL NUMBER.

County.	Normal group.	Feeble-minded and epileptic.	Total insane and defective group.	Total population.
Montcalm.....	1	0	0	1
Montmorency.....	2	1	2	4
Muskegon.....	20	1	9	29
Newaygo.....	4	0	2	6
Oakland.....	12	3	11	23
Oceana.....	3	3	3	6
Ogemaw.....	2	0	1	3
Ontonagon.....	14	0	0	14
Osceola.....	7	3	4	11
Otsego.....	4	2	2	6
Ottawa.....	6	6	13	19
Presque Isle.....	5	3	7	13
Roscommon.....	1	0	0	1
Saginaw.....	22	7	18	40
Sanilac.....	9	2	8	17
Schoolcraft.....	6	0	2	8
Shiawassee.....	1	0	3	4
St. Clair.....	17	10	17	34
St. Joseph.....	2	0	0	2
Tuscola.....	6	4	8	14
Van Buren.....	2	1	1	3
Washtenaw.....	9	2	4	13
Wayne.....	420	35	76	506
Wexford.....	5	0	0	5

## NUMBER PER 10,000 FOREIGN BORN POPULATION.

County.	Normal group.	Feeble-minded and epileptic.	Total insane and defective group.	Total population.
Alcona.....	7.2	0	7.2	14.5
Alger.....	19.1	0	3.2	22.3
Allegan.....	14.3	2.4	11.9	26.2
Alpena.....	14	3.5	7	21
Antrim.....	15.6	15.6	15.6	31.2
Baraga.....	26.9	0	0	26.9
Barry.....	15.2	0	7.6	22.8
Bay.....	15	1.9	5	20
Benzie.....	40.3	8.1	8.1	48.3
Berrien.....	15.1	2.5	5	20.1
Branch.....	0	7.8	7.8	7.8
Calhoun.....	5.8	5.8	13.6	19.4
Cass.....	0	0	0	0
Charlevoix.....	10.2	0	3.4	17.1
Cheboygan.....	17.6	10.1	17.6	35.2
Chippewa.....	7.4	0	3.2	10.6
Clare.....	16.2	0	0	16.2
Clinton.....	18.2	6.1	6.1	24.2
Crawford.....	47.1	11.8	11.8	58.8
Delta.....	39.3	5.2	7.2	45.5
Dickinson.....	14.5	1.2	2.4	16.95
Eaton.....	30.8	7.5	22.6	52.6
Emmet.....	0	0	0	0
Genesee.....	17.2	4.3	8.6	25.8
Gladwin.....	20.3	6.8	13.5	33.8

TABLE 42.—*Concluded.*

NUMBER PER 10,000 FOREIGN BORN POPULATION.

County.	Normal group.	Feeble-minded and epileptic.	Total insane and defective group.	Total population.
Gogebic.....	7.2	1.8	3.6	10.7
Grand Traverse.....	11.96	0	0	11.96
Gratiot.....	20.3	5.1	5.1	25.4
Hillsdale.....	30.4	10.1	10.1	40.6
Houghton.....	12.9	1.5	4.2	14.4
Huron.....	8.1	4.1	7.1	15.3
Ingham.....	12.9	1.8	5.5	18.4
Ionia.....	23.8	3.4	17	40.9
Iosco.....	16.8	8.4	16.8	33.5
Iron.....	8.7	0	2.9	11.6
Isabella.....	18.6	11.1	11.1	29.7
Jackson.....	13.4	1.7	5	18.4
Kalamazoo.....	18.1	4.5	4.5	22.8
Kalkaska.....	31.6	0	0	31.6
Kent.....	10.95	3.1	5.1	16.3
Lake.....	11.4	0	0	11.4
Lapeer.....	12.8	15.3	15.3	28.1
Leelanau.....	16.4	5.5	5.5	21.9
Lenawee.....	14.3	0	8.6	22.9
Livingston.....	26.5	19.9	26.5	53.1
Luce.....	6.1	0	0	6.1
Macomb.....	20.4	0	5.6	26
Manistee.....	44.6	7.4	16.4	60.9
Marquette.....	11.2	3.9	5.6	16.7
Mason.....	33.4	0	4.5	42.4
Mecosta.....	15.8	7.9	7.9	23.6
Menominee.....	16.1	5.9	7.3	24.9
Midland.....	14.6	4.9	9.7	24.3
Missaukee.....	29.4	0	0	29.4
Monroe.....	15.8	3.2	9.5	25.3
Montcalm.....	2.7	0	0	2.7
Montmorency.....	26.3	13.1	26.3	52.6
Muskegon.....	20	1	9	29
Newaygo.....	17.1	0	8.5	25.6
Oakland.....	17	4.3	15.6	32.7
Oceana.....	13.8	13.8	13.8	27.7
Ogemaw.....	12.4	0	6.2	18.5
Ontonagon.....	47.7	0	0	47.7
Osceola.....	25.5	10.9	14.5	40
Otsego.....	29.5	14.8	14.8	44.3
Ottawa.....	6.2	6.2	13.4	19.6
Presque Isle.....	22.3	13.4	31.4	58.1
Roscommon.....	25.6	0	0	25.6
Saginaw.....	11.3	3.6	9.3	20.6
Sanilac.....	10.1	2.2	8.99	19.1
Schoolcraft.....	21.9	0	7.3	29.2
Shiawassee.....	2.6	0	7.8	10.4
St. Clair.....	13.3	7.8	13.3	26.6
St. Joseph.....	11.4	0	0	11.4
Tuscola.....	9.7	6.5	12.9	22.6
Van Buren.....	7.9	3.9	3.9	11.8
Washtenaw.....	16.5	3.7	7.3	23.8
Wayne.....	24.5	2	4.4	29.5
Wexford.....	15.8	0	0	15.8

TABLE 43.—*Nativity of parents of County Infirmary population.*

	Normal.	Neurotic.	Insane.	F. M.	Epileptic.	X.	?	Total.
Place of birth unknown.....	184	7	184	478	67	37	21	978
Austria.....	35	.....	2	2	2	.....	3	44
Belgium.....	18	.....	3	7	.....	.....	.....	28
Canada.....	272	6	49	88	14	9	3	441
Denmark.....	16	.....	6	.....	.....	.....	2	24
England—Wales.....	271	7	51	63	15	10	3	420
Finland.....	44	.....	7	8	.....	2	.....	61
France.....	41	5	12	11	5	4	1	79
Germany—Prussia.....	649	15	89	99	18	18	13	901
Holland.....	69	.....	17	31	4	2	.....	123
Hungary.....	15	.....	.....	2	.....	.....	1	18
Ireland.....	681	3	73	92	5	24	4	882
Italy.....	15	.....	.....	2	2	.....	2	21
Norway.....	33	.....	4	7	.....	2	.....	46
German Poland.....	33	.....	.....	4	.....	.....	.....	37
Russian Poland.....	15	.....	5	.....	.....	.....	1	21
Russia.....	35	.....	.....	5	4	.....	.....	44
Scotland.....	186	1	15	21	1	3	4	231
Sweden.....	103	.....	11	7	.....	6	.....	127
Switzerland.....	25	.....	4	3	.....	.....	.....	32
Other countries.....	33	1	8	11	2	2	7	64
Total foreign born.....	2,589	38	356	463	72	82	44	3,644
Michigan.....	103	4	15	113	32	1	13	281
Indiana.....	11	.....	1	11	3	.....	1	27
New York.....	462	5	140	179	28	27	5	846
Ohio.....	90	3	18	54	4	2	1	172
Pennsylvania.....	92	3	22	47	11	4	2	181
New Jersey.....	25	1	11	5	.....	.....	.....	42
New England States.....	172	9	46	30	3	6	5	271
Southern States.....	101	2	11	8	1	1	1	125
Western States.....	8	.....	.....	7	4	.....	.....	19
State unknown.....	37	2	10	25	3	2	3	82
Total native born.....	1,101	29	274	479	89	43	31	2,046

## SUMMARY OF NATIVITY OF PATIENTS' PARENTS.

	Normal group.	Insane.	F. M.	Insane and defective.	Total.
Both parents foreign born.....	1,232	162	198	430	1,680
One parent foreign born.....	167	32	69	118	291
Both parents native born.....	482	118	195	360	855
One parent native born, one unknown....	42	16	39	72	118
Both parents unknown.....	51	79	209	332	390

TABLE 44.—Age of County Infirmary inmates.

Number of individuals whose age is:	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	Normal group.		T.	Insane.		T.	Feeble-minded.		T.	Insane and defective.		T.	Total population.		T.
	M.	F.		M.	F.		M.	F.		M.	F.		M.	F.	
Unknown.....	1	0	1										2	0	2
Under 5 years.....	2	1	3				2	3	2	2	2	4	10	11	21
5 to 9 years.....	3	0	3				3	3	6	3	3	6	8	3	11
10 to 14 years.....	2	1	3				4	6	10	4	7	11	6	8	14
15 to 19 years.....	3	2	5				7	9	16	11	9	20	14	11	25
20 to 24 years.....	20	6	26		1	1	14	17	31	21	19	40	42	25	67
25 to 29 years.....	24	4	28	1	2	3	9	14	23	13	17	30	37	21	58
30 to 34 years.....	38	0	38	2	2	4	25	23	48	31	34	65	69	34	103
35 to 39 years.....	50	4	54	3	1	4	24	34	58	35	41	76	86	45	131
40 to 44 years.....	70	8	78	2	6	8	31	40	71	39	50	89	111	58	169
45 to 49 years.....	97	15	112	16	6	22	37	25	62	61	33	94	160	48	208
50 to 54 years.....	125	11	136	16	3	19	38	33	71	64	43	107	190	54	244
55 to 59 years.....	157	21	178	12	11	23	35	30	65	60	44	104	220	65	285
60 to 64 years.....	210	23	233	28	8	36	64	25	89	111	46	157	324	70	394
65 to 69 years.....	233	39	272	22	6	28	44	28	72	78	39	117	312	78	390
70 to 74 years.....	214	38	252	28	21	49	25	25	50	68	49	117	284	89	373
75 to 79 years.....	216	37	253	38	29	67	10	9	19	58	43	101	276	81	357
80 to 84 years.....	149	36	185	41	33	74	7	5	12	54	42	96	205	80	285
85 to 89 years.....	60	22	82	24	25	49	2	2	4	28	28	56	90	51	141
90 to 94 years.....	15	5	20	13	3	16	1	0	1	14	3	17	31	8	39
95 years and over.....	9	3	12	3	1	4				4	1	5	13	4	17
Average age of all individuals.....	62.8	67	.....	71.2	72	.....	50.9	48.1	.....	61.4	55.5	.....	61.4	58.9	60.7

TABLE 45.—*Education and religious affiliations of County Infirmary inmates.*

	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Number of individuals who can:															
Read.....	1,275	196	1,471	111	82	193	143	123	266	312	237	549	1,602	435	2,037
Write.....	1,198	175	1,373	109	76	185	108	93	201	270	194	464	1,483	371	1,854
Number of individuals who have been to:															
Common school.....	1,295	192	1,487	134	83	217	210	171	381	423	287	710	1,737	483	2,220
High school.....	143	22	165	14	2	16	3	0	3	20	3	23	164	25	189
College.....	32	3	35	1	0	1	.....	.....	.....	2	0	2	34	3	37
Number of individuals who have never been to school.....	137	36	173	16	14	30	78	77	155	107	100	207	251	145	396
Number of individuals who were:															
Catholics.....	607	67	674	39	26	65	78	42	120	144	78	222	760	148	908
Protestants.....	706	171	877	107	89	196	119	127	246	275	239	514	995	415	1,410

TABLE 46.—*Previous occupations of the men in the County Infirmaries.*

Number of individuals whose occupation was:	N.	I.	F.	I. and D.	Total.	N.	I.	F.	I. and D.	Total.
Unknown.....						140	63	169	271	427
A trade*.....						488	48	24	89	580
Farmer (or farm laborer).....						195	48	49	124	320
Common laborer.....						612	65	115	217	840
Professional:										
Journalist.....	2	1	1	2	4					
Teacher.....	2	2		2	4					
Veterinary surgeon.....	3			1	4					
Chiropodist.....		1		1	1					
Contractor.....	1				1					
Lawyer.....	1				1					
Musician.....	1				1					
Physician.....	1				1					
Total.....						11	4	1	6	17
Commercial:										
Clerk.....	13	2		2	15					
Merchant.....	7	2		2	9					
Salesman.....	6				6					
Bookkeeper.....	4	1		1	5					
Telegraph operator.....	3				3					
Canvasser.....	1	1		1	2					
Collector.....	1				1					
Manufacturer.....	1				1					
Stenographer.....	1				1					
Total.....						37	6		6	43
Other occupations:										
Lumberman.....	97	6	14	22	119					
Miner.....	36		2	6	43					
Sailor.....	26	2	3	5	31					
Peddler.....	11	3	2	5	16					
Bartender.....	8	1	1	2	10					
Porter.....	8				9					
Fishermen.....	5	1		1	6					
Jockey.....	3			1	4					
Waiter.....	4				4					
Saloonkeeper.....	1	1	1	2	3					
Janitor.....	2				2					
Nurse.....	2				2					
Billposter.....	1				1					
Bootblack.....	1				1					
Brewer.....			1	1	1					
Clothes cleaner.....	1				1					
Deputy.....	1				1					
Gambler.....	1				1					
Hunter.....	1				1					
Jack of all trades.....		1		1	1					
News agent.....	1				1					
Night watchman.....	1				1					
Policeman.....	1				1					
Real estate.....	1				1					
Sealer.....	1				1					
Trapper.....	1				1					
Total.....						215	15	24	46	263
Total of all occupations.....						1,698	249	382	759	2,490

\*Trades include the following: barber, bench hand, blacksmith, boiler-maker, bricklayer, butcher, cabinet-maker, carpenter, cigar-maker, cook, coppersmith, core-worker, engineer, machinist, metal polisher, moulder, painter, pattern-maker, plumber, sign writer, ship carpenter, shoemaker, steam fitter, tailor, tinsmith, watch maker, wood worker.



TABLE 47.—*Habits of County Infirmary inmates.*

Alcoholism.	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Number of individuals who drank in moderation: Occasionally..... Steadily..... Steadily and occasionally to excess..... Periodically.....	216	3	219	19	1	20	29	2	31	63	3	66	280	6	286
	239	0	239	10	0	10	18	0	18	36	0	36	278	0	278
	131	2	133	6	0	6	10	0	10	19	0	19	152	2	154
	5	0	5	2	0	2	.....	.....	.....	2	0	2	7	0	7
	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Total.....	591	5	596	37	1	38	57	2	59	120	3	123	717	8	725
Number of individuals who drank excessively: Occasionally..... Steadily..... Periodically.....	157	1	158	12	2	14	19	0	19	39	2	41	197	3	200
	302	0	302	25	0	25	27	0	27	60	1	61	363	1	364
	176	0	176	10	0	10	13	1	14	30	2	32	207	2	209
	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Total.....	635	1	636	47	2	49	59	1	60	129	5	134	767	6	773
Number of individuals who drank, amount undetermined:  Total number of individuals who drank.....	209	10	219	44	2	46	40	1	41	102	3	105	315	13	328
	1,435	16	1,451	128	5	133	156	4	160	351	11	362	1,799	27	1,826
	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Number of individuals who never drank..... Number of individuals about whom no data was obtained..... Number of individuals who had delirium tremens at time of interview..... Number of individuals who had had delirium tremens previously.....	141	0	141	40	0	40	77	0	77	130	0	130	278	0	278
	122	0	122	81	0	81	149	0	149	278	0	278	413	0	413
	10	0	10	1	0	1	.....	.....	.....	1	0	1	11	0	11
	23	0	23	1	0	1	1	0	1	2	0	2	25	0	25
	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Drugs. Number of individuals who used drugs..... Number of individuals who had used drugs.....	24	6	30	3	2	5	1	3	4	5	6	11	29	12	41
	1	1	2	1	2	3	0	3	3	1	5	6	2	6	8

TABLE 48.—*Institutional history of inmates of County Infirmaries.*

	Normal group.			Insane.			Feebleminded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Number of individuals who have been arrested:															
One to three times.....	480	2	482	40	3	43	63	10	73	130	14	144	616	16	632
Four to ten times.....	72	0	72	4	1	5	14	0	14	20	1	21	92	1	93
Eleven to twenty times.....	19	0	19	.....	.....	.....	3	0	3	4	0	4	24	0	24
Twenty-one times and over.....	13	1	14	.....	.....	.....	1	0	1	24	0	24	37	1	38
Total number individuals arrested.....	584	3	587	46	4	50	81	10	91	178	15	193	769	18	787
Number of individuals who have been in House of Correction:															
Once.....	9	1	10	.....	.....	.....	2	1	3	4	1	5	13	2	15
Twice.....	1	0	1	.....	.....	.....	.....	.....	.....	2	0	2	3	0	3
Ten times.....	.....	.....	.....	.....	.....	.....	1	0	1	1	0	1	1	0	1
Total.....	10	1	11	2	0	2	3	1	4	7	1	8	17	2	19
Number of individuals who have been in a State Prison:															
One time.....	8	0	8	2	0	2	.....	.....	.....	4	0	4	12	0	12
Two times.....	.....	.....	.....	1	0	1	1	0	1	2	0	2	2	0	2
Three times.....	1	0	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	0	1
Total.....	9	0	9	3	0	3	1	0	1	6	0	6	15	0	15
Number of individuals who have been in the State Public School.....															
Number of individuals who have been in one of the State Industrial Schools.....	7	0	7	.....	.....	.....	8	9	17	8	9	17	15	9	24
Number of individuals who have been in a State charitable institution:															
One time.....	8	2	10	.....	.....	.....	7	4	11	9	5	14	17	8	25
Two times.....	2	0	2	.....	.....	.....	1	1	2	3	2	5	5	2	7
Three times.....	1	0	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	0	1
Four times.....	1	0	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	0	1
Total.....	12	2	14	.....	.....	.....	8	5	13	12	7	19	24	10	34

TABLE 48.—Continued.

	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Number of individuals who have been in a private charitable institution:															
One time.....	16	6	22		3	5		1	12		3	17	19	23	42
Two times.....	0	1	1		0	1		1	2		2	2	2	3	5
Total.....	16	7	23		3	6		2	14		5	19	21	26	47
Number of individuals who have been in State insane hospitals:															
One time.....	3	4	7		13	9		6	2		22	12	25	16	41
Two times.....	1	0	1		0	1		1	1		2	2	3	2	5
More than two times.....					2	1		0	1		2	2	2	2	4
Total.....	4	4	8		15	11		7	4		26	16	30	20	50
Number of individuals who have been in other County infirmaries:															
One time.....	58	11	69		10	6		18	25		43	33	94	46	140
Two times.....	4	2	6		1	1		1	2		3	4	7	6	13
Three times.....	1	0	1		0	1		1	1		2	2	2	2	4
Four times.....					1	0		0	1		1	1	1	1	2
Six times.....												0	1	0	1
Eight times.....								1	0		1	0	1	0	1
Thirty-one times.....								1	0		1	0	1	0	1
Total.....	63	13	76		12	8		22	29		51	44	107	55	162
Number of individuals who have been in a County infirm-ary outside of the State:															
Number of individuals who have been in a general hospital.....	10	7	17		7	4		4	5		9	12	22	17	39
Total number of admissions to general hospitals.....	692	85	777		43	29		55	39		94	131	829	164	993
Total number of admissions to general hospitals.....	1,066	135	1,201		67	40		96	59		155	212	1,286	249	1,535

TABLE 48.—*Concluded.*

	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Number of individuals whose previous admissions to the County Infirmary in which they were interviewed numbered:															
One.....	280	32	312	28	12	40	63	54	117	99	76	175	385	109	494
Two.....	140	14	154	12	5	17	31	9	40	49	16	65	190	31	221
Three.....	70	7	77	9	0	9	9	4	13	23	7	30	95	14	109
Four.....	35	4	39	6	0	6	12	7	19	23	8	31	58	12	70
Five.....	29	2	31	5	0	5	9	1	10	16	3	19	45	5	50
Six.....	20	1	21	3	1	4	9	1	10	13	2	15	33	3	36
Seven.....	27	0	27	0	1	1	3	0	3	7	1	8	35	2	37
Eight.....	19	5	24	3	0	3	2	2	4	6	3	9	25	8	33
Nine.....	13	2	15	1	0	1	3	0	3	4	0	4	17	2	19
Ten.....	10	0	10	1	0	1	2	0	2	3	0	3	13	0	13
Eleven.....	6	2	8				1	0	1	3	0	3	9	2	11
Twelve.....	13	1	14				0	1	1	0	1	1	13	2	15
Thirteen.....	8	0	8				2	0	2	2	0	2	10	0	10
Fourteen.....	3	0	3										3	0	3
Fifteen.....	4	1	5										4	1	5
Sixteen.....	3	1	4										3	1	4
Seventeen.....	5	1	6	1	0	1				1	0	1	6	1	7
Eighteen.....	5	1	6										5	1	6
Nineteen.....	4	1	5										4	1	5
Twenty.....	7	0	7										7	0	7
Twenty-one.....	1	0	1										1	0	1
Twenty-two.....				1	0	1				1	0	1	1	0	1
Twenty-three.....							1	0	1	1	0	1	1	0	1
Twenty-four.....	1	0	1										1	0	1
Twenty-five.....	2	0	2										2	0	2
Over twenty-five.....	6	0	6										6	0	6
Total.....	711	76	787	70	19	89	147	79	226	251	117	368	972	195	1,167

TABLE 49.—*Facts in regard to physical condition of County Infirmiry patients.\**

	Normal group.		Insane.		Feeble-minded.		Insane and defective.**		Total population.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Venereal infection.										
Individuals with:										
Primary or secondary syphilis.....	12	3	15							
Tertiary syphilis.....	12	4	16	1	0	1			13	6
Probable syphilis.....	3	0	3	0	0				18	19
Gonorrhea.....	8	1	9						4	0
Probable gonorrhea.....	3	0	3						8	2
Other individuals who had had:									3	1
Syphilis.....	99	4	103	11	2	13				
Probable syphilis.....	63	5	68	18	2	20			117	8
Gonorrhea once.....	148	0	148	8	0	8			87	12
Gonorrhea more than once.....	75	0	75	3	0	3			172	7
Questionable gonorrhea.....	8	1	9						86	0
Total number of individuals with:									8	2
Venereal infection.....	308	11	319	22	2	24				
Probable venereal infection.....	43	6	49	18	2	20			402	40
Number who had been infected but denied it.....	41	1	42	7	0	7			67	14
Nasal necrosis.....	7	3	10	1	4	5			31	31
Locomotor ataxia.....	58	3	61						11	0
Probable locomotor ataxia.....	12	1	13						13	10
Paralysis.									4	62
Number of individuals with:									2	4
Hemiplegia.....	117	18	135	13	4	17			15	1
Paraplegia.....	26	5	31	0	1	1			2	0
Monoplegia.....	15	1	16						46	15
Form undetermined.....	26	4	30	6	1	7			5	5
Total.....	184	28	212	19	6	25			28	28
Paralysis agitans.....	23	7	30	1	2	3			64	64
Probable paralysis agitans.....	5	0	5	0	1	1			2	2

\*NOTE.—See page 77 for discussion of following material and method of obtaining it.

\*\*Ins. and def. always mean insane and defective. This includes insane, feeble-minded, epileptic, and those of X mentality.

TABLE 49.—Continued.

Eye color.	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Injury.															
Number of individuals with:															
Temporary injury.....	86	5	91	1	1	2	7	1	8	11	4	15	97	9	106
Permanent injury.....	234	22	256	24	9	33	43	17	60	77	29	106	313	51	364
Physical stigmata.															
Number of individuals in whom was found:															
Hare lip.....	1	0	1	.....	.....	.....	0	1	1	0	1	1	1	1	2
Speech defect.....	1	0	1	.....	.....	.....	19	21	40	19	23	42	20	23	43
Hypertrichosis.....	0	16	16	0	8	8	0	27	27	0	38	38	0	56	56
Glabrous condition.....	3	0	3	1	0	1	2	0	2	3	0	3	6	0	6
Hernaphroditism.....	1	0	1	.....	.....	.....	0	1	1	0	1	1	1	1	2
Mongolianism.....	.....	.....	.....	.....	.....	.....	3	2	5	4	2	6	4	2	6
Microcephalia.....	.....	.....	.....	.....	.....	.....	2	2	4	2	2	4	2	2	4
Macrocephalia.....	.....	.....	.....	.....	.....	.....	1	0	1	2	0	2	2	0	2
Cretinism.....	.....	.....	.....	.....	.....	.....	1	2	3	1	2	3	1	2	3
Dwarfism.....	.....	.....	.....	.....	.....	.....	2	2	4	2	2	4	2	2	4

TABLE 49.—*Concluded.*

Other physical affections.	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Number of individuals with:															
Chorea.....	3	1	4	3	1	4	3	2	5	6	3	9	9	4	13
Tuberculosis.....	75	1	76	1	1	2	4	0	4	6	1	7	81	3	84
Probable tuberculosis.....	6	0	6				1	0	1	1	0	1	7	0	7
Rheumatism.....	528	84	612	33	23	56	37	32	69	83	56	139	620	141	761
Rheumatism in the past.....	35	7	42	5	0	5	3	0	3	10	1	11	45	9	54
Arthritis.....	63	13	76	5	14	19	11	8	19	20	22	42	83	35	118
Ankylosis.....	20	4	24	2	0	2	2	2	4	5	2	7	25	6	31
Asthma.....	88	13	101	8	2	10	7	5	12	18	9	27	106	22	128
Marked sclerosis.....	41	7	48	15	9	24	3	0	3	21	9	30	63	16	79
Varicose condition.....	46	12	58	0	1	1	5	6	11	7	11	18	54	23	77
Probable heart trouble.....	65	18	83	3	4	7	7	3	10	14	8	22	81	27	108
Dropical condition.....	27	15	42	3	5	8	3	6	9	7	12	19	34	27	61
Nephritis.....	6	0	6	0	1	1				1	1	2	7	1	8
Dysuria or enuresis.....	94	22	116	10	8	18	9	8	17	25	18	43	120	40	160
Hernia.....	170	5	175	23	4	27	33	3	36	69	7	76	242	12	254
Cancer.....	13	4	17	4	3	7	2	1	3	6	4	10	19	8	27
Thyroid enlargement.....	2	5	7	1	2	3	2	10	12	3	14	17	5	19	24
Uteran prolapse.....	0	7	7	0	2	2	0	3	3	0	8	8	0	15	15
Pregnant.....	0	4	4				0	3	3	0	3	3	0	7	7
Curvature.....	16	10	26	2	6	8	13	15	28	18	26	44	34	36	70
Other.....	175	10	185	11	7	18	17	19	36	33	29	62	213	40	253
Sterilized.....															
Deaf.....	202	34	236	39	18	57	36	29	65	88	51	139	296	87	383
Dumb.....	5	2	7	0			7	7	14	8	7	15	14	10	24
Eye affections.															
Number of individuals who are:															
Totally blind.....	57	13	70	5	8	13	12	7	19	20	17	37	77	30	107
Blind in one eye.....	61	4	65	7	7	14	17	9	26	27	20	47	90	25	115
Nearly blind.....	51	12	63	13	10	23	20	10	30	40	21	61	91	35	126
Number of individuals with:															
Falling eyesight.....	56	6	62	5	3	8	12	10	22	20	14	34	76	20	96
Arcus senilis.....	578	81	659	80	39	119	86	53	139	194	104	298	778	189	967
Strabismus.....	28	5	33	3	2	5	31	28	59	36	31	67	65	38	103
Conjunctivitis.....	31	2	33	8	2	10	8	2	10	20	6	26	51	8	59

TABLE 50.—*Civil condition of County Infirmary inmates.*

	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Number of individuals who had never been married.....	682	38	720	78	23	101	289	189	478	437	243	680	1,138	289	1,427
Number of individuals who had been married:															
One time.....	860	165	1,025	114	95	209	52	76	128	201	192	393	1,070	361	1,431
Two times.....	109	51	160	29	28	57	12	31	43	54	68	122	164	120	284
Three times.....	17	13	30	4	4	8	0	9	9	7	13	20	24	28	52
Four times.....	6	5	11	1	1	2	0	1	1	1	2	3	7	7	14
Total.....	992	234	1,226	148	128	276	64	117	181	263	275	538	1,265	516	1,781
Number of individuals who are married now.....	269	49	318	46	36	82	14	22	36	71	66	137	342	118	460
Number of individuals who had been separated:															
Once.....	160	36	196	19	16	35	18	42	60	47	65	112	208	101	309
Twice.....	4	3	7	3	1	4	0	6	6	5	8	13	9	11	20
Total.....	164	39	203	22	17	39	18	48	66	52	73	125	217	112	329
Number of individuals who had been divorced:															
Once.....	117	20	137	12	10	22	6	18	24	25	29	54	143	50	193
Twice.....	7	1	8	1	0	1	0	1	1	2	1	3	9	2	11
Total.....	124	21	145	13	10	23	6	19	25	27	30	57	152	52	204
Number of individuals who had been widowed:															
Once.....	468	130	598	53	65	118	30	51	81	107	129	236	580	261	841
Twice.....	44	25	69	11	14	25	4	9	13	21	26	47	66	54	120
Three times.....	9	8	17	0	2	2	.....	.....	.....	0	2	2	9	10	19
Total.....	521	163	684	64	81	145	34	60	94	128	157	285	655	325	980
Number of individuals about whom there was no data in regard to civil condition.....	24	4	28	23	7	30	29	22	51	59	35	94	87	39	126



TABLE 51.—All children of County Infirmary inmates.

	Normal group.			Insane.			Feeble-minded.			Insane and defective.			Total population.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Number of individuals who had had:															
One child.....	161	41	202	17	25	42	12	62	74	37	96	133	198	140	338
Two children.....	147	33	180	22	21	43	10	29	39	40	54	94	189	88	277
Three children.....	113	20	133	22	17	39	4	16	20	32	37	69	145	58	203
Four children.....	88	27	115	6	11	17	2	11	13	13	26	39	103	53	156
Five children.....	77	13	90	11	7	18	2	12	14	16	21	37	94	34	128
Six children.....	53	13	66	7	6	13	3	10	13	16	16	32	70	30	100
Seven children.....	44	6	50	12	3	15	1	3	4	17	7	24	61	13	74
Eight children.....	35	6	41	4	0	4	4	1	5	10	1	11	45	7	52
Over eight children.....	64	24	88	9	11	20	4	8	12	15	22	37	80	46	126
Total.....	782	183	965	110	101	211	42	152	194	196	280	476	985	469	1,454
Number of individuals who had had no children.....															
.....	149	36	185	15	15	30	12	13	25	33	30	63	182	67	249
Number of individuals who have children living now:															
One child.....	172	48	220	24	31	55	13	37	50	47	75	122	221	126	347
Two children.....	136	26	162	22	12	34	7	22	29	38	40	78	176	68	244
Three children.....	107	16	123	13	13	26	3	14	17	21	29	50	129	45	174
Four children.....	62	11	73	6	4	10	3	9	12	13	15	28	76	26	102
Over four children.....	121	15	136	16	6	22	7	7	14	28	15	43	151	30	181
Total.....	598	116	714	81	66	147	33	89	122	147	174	321	753	295	1,048
Number of individuals who have no living children.....															
.....	267	87	354	31	36	67	17	48	65	59	93	152	326	182	508





TABLE 54.—*Fraternities of County Infirmary inmates.*

Fraternities of County Infirmary inmates.	Normal, neurotic, questionable.	Feeble-minded, epileptic, insane and X.	Total.
Number of individuals whose families numbered:			
One child.....	5	13	18
Two children.....	36	45	81
Three children.....	52	47	99
Four children.....	68	41	109
Five children.....	60	38	98
Six children.....	58	40	98
Seven children.....	71	41	112
Eight children.....	67	30	97
Nine children.....	48	26	74
Ten children.....	43	21	64
Eleven children.....	25	14	39
Twelve children.....	20	14	34
Thirteen children.....	8	5	13
Fourteen children.....	8	5	13
Fifteen children.....	2	3	5
Sixteen children.....	1	4	5
Seventeen children.....	1	.....	1
Eighteen children.....	1	.....	1
Nineteen children.....	1	.....	1
Twenty children.....	1	.....	1
Twenty-one children.....	1	.....	1
Total number of individuals.....	577	387	964
Average number of children per family.....	6.793	6.136	6.53

TABLE 55.—*Facts in regard to families and relatives of County Infirmary inmates.*

Number of families having in the County Infirmary now:			
Two members.....			81
Three members.....			10
Four members.....			2
Five members.....			1
Seven members.....			2
Total.....			96
Total number of individuals in the County Infirmary who had a relative there at the time of the interview.....			219
Institutional history of relatives.	Blood relation.	Relatives by marriage.	Total all relatives.
Number of individuals whose relatives in the County Infirmary numbered:			
One.....	109		167
Two.....	29		29
Three.....	11		12
Four.....	8		10
Five.....	4		3
Six.....	2		2
Seven.....			1
Eight.....	2		3
Total all individuals.....			227
Number of individuals whose consorts are either in the County Infirmary or have been.....			117
Total number of relatives who have been in:			
County Infirmary*.....	280		359
Other County Infirmarys.....	20	4	24
Howell State Sanatorium.....	1		1
State Public School.....	76		76
Adrian and Lansing Industrial Schools.....	6		6
Lapeer Home and Training School.....	25	2	27
State Hospitals for the Insane.....	50	25	75
State Prisons.....	7	13	20
Detroit House of Correction.....	4		4
Jails.....	8	7	15
Number of individuals whose feeble-minded relatives number:			
One.....	53		
Two.....	21		
Three.....	10		
Four.....	9		
Five.....	1		
Seven.....	3		
Nine.....	1		
Ten.....	1		
Total number individuals.....			99

\*Total number of relatives who have been in the same County Infirmary as was the patient interviewed by the investigator.

TABLE 55.—*Concluded.*

	Blood relation.	Relatives by marriage.	Total all relatives.
Total number of relatives who were:			
Feeble-minded.....	204	23	227
Epileptic.....	45	1	46
Insane.....	90	37	127
Suicides.....	13	3	16
Choreic.....	9		9
Sexually irregular*.....	25		25

\*NOTE.—This class includes only those about whom very definite and often detailed evidence pointed to sexual immorality.

TABLE 56.—*Average number of years the individuals of different mental status have been in County Infirmaries with average cost of maintenance per individual.*

Number individuals.	Mental status.	Average total duration of County Infirmary residences with cost.			Average last (present) County Infirmary residence with cost.		
		Average duration in years.	Average cost per individual.*	Total cost of all individuals.	Average duration in years.	Average cost per individual.	Total cost of all individuals.*
710	Feeblem'd, male and female..	9.32	\$1,419 11	\$1,007,568 10	8.44	\$1,299 44	\$922,502 40
407	Insane, male and female.....	6.28	990 81	403,259 67	5.94	948 63	386,092 41
1,312	Ins. and def., male and fem..	7.83	1,219 92	1,600,535 04	7.20	1,115 26	1,463,221 12
1,974	Nor'l and neurotic, m. and f.	3.23	552 72	1,091,069 28	2.34	415 03	819,269 22
2,490	Total males.....	4.17	683 55	1,602,039 50	3.34	572 46	1,425,425 40
844	Total females.....	7.55	1,174 07	990,915 08	6.92	1,090 80	920,635 20
3,334	Total male and female.....	5.03	804 34	2,681,669 56	4.25	696 15	2,320,964 10

\*The average cost was figured on the basis of the average weekly per capita costs of maintenance ("after deducting value of farm purchased and building erected") as given in the Annual Abstract of the Report of the Superintendents of the Poor in the State.

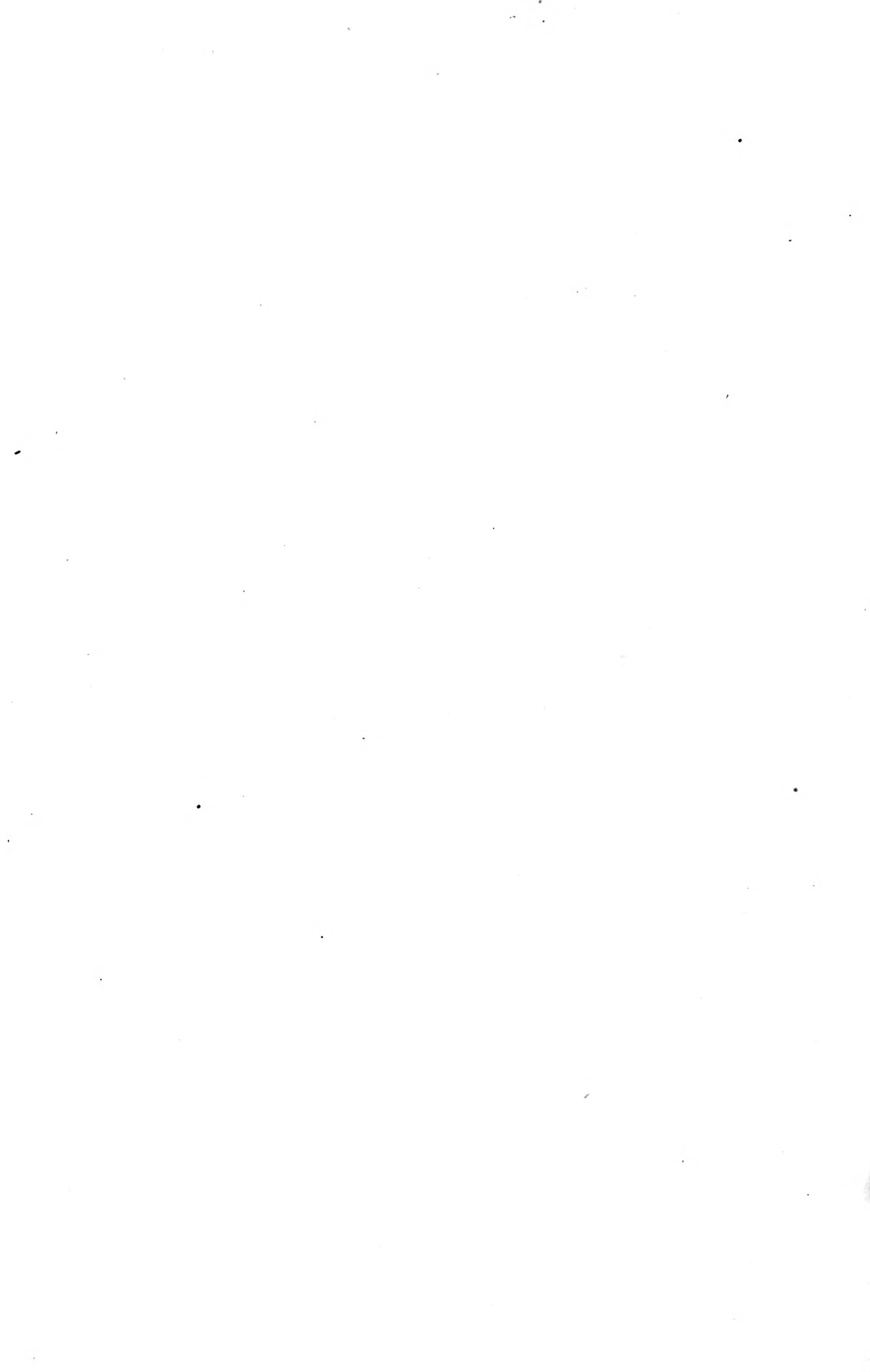
TABLE 57.—*Cost of maintenance of one family in a County Infirmary.*

SEE CHART NUMBER 11.

Generation.	Individual's Chart No.	Dates of County Infirmary residence.	Cost for maintenance.*
II.....	31a {	3/3/94-3/8/94 10/9/97-11/9/97 1/10/04-11/5/13	\$1,601 59
III.....	16 {	5/20/86-8/27/07	2,728 14
	34 {	5/25/04-d-10/20/05	193 09
	121 {	5/22/07-d-11/2/13	6,708 50
	122 {	10/71-11/3/13	6,073 39
IV.....	24 {	8/1/00-4/1/01	
		9/19/03-d-9/26/03	78 11
	26 {	7/8/10-3/8/11	
		9/5/10-11/8/10	124 57
V.....	84 {	b. 5/22/67-d-5/22/67	
	85 {	b. /87—?***	
	9 {	3/10/00-7/1/00	36 32
	10 {	4/6/00-7/1/00	27 63
Total cost.....			\$17,573 97

\*Total cost of maintenance was figured on the average weekly per capita cost for maintenance as given in the Annual Abstract of the Reports of the Superintendents of the Poor in the State.

\*\*No County Infirmary record of his discharge.







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